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"SALUS POPULI SUPREMA LEX"



CPS
CITY OF PORTSMOUTH

ANNUAL REPORT

of the

MEDICAL OFFICER OF HEALTH

for the Year 1953

including

THE REPORT OF THE PUBLIC ANALYST

THE GROSVENOR PRESS
PORTSMOUTH

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The Right Worshipful the Lord Mayor
COUNCILLOR FRANK MILES, J.P.

HEALTH SERVICES COMMITTEE
1953 - 1954

Chairman

ALDERMAN J. P. D. LACEY, O.B.E., J.P.

Vice-Chairman

ALDERMAN H. G. COOK

Aldermen

MRS. S. A. C. SHARPE ALBERT JOHNSON

Councillors

J. F. FREESTON	G. F. COLLINS	D. S. WALLACE, M.B.E.
M. J. E. WALLIS	H. SOTNICK	W. G. EDWARDS, J.P.
P. W. FISHER	T. J. SMITH	W. GREAVES
C. W. STEVENS	C. A. WORLEY	R. MACK
G. S. FURNEAUX	MRS. E. M. BERRYMAN, J.P.	L. J. EVANS
P. MCG. CORSAR		

Co-opted Members

MRS. L. L. ALLAWAY	MISS M. GAY, O.B.E.
MRS. C. E. ATKINS, J.P.	DAME ELISABETH KELLY, D.B.E., J.P.
MRS. D. BOWLES	MR. R. E. MORGAN
DR. H. K. CHILDS	MRS. L. C. NICHOLSON
DR. G. H. DUTHIE	MRS. D. SPITTLE

HEALTH AND HOUSING COMMITTEE
1953 - 1954

Chairman

COUNCILLOR FRANK MILES, J.P. (Lord Mayor)

Deputy Chairman

COUNCILLOR G. A. DAY

Vice-Chairman

ALDERMAN A. W. WEST

Aldermen

J. DAVIDSON ALBERT JOHNSON
J. P. D. LACEY, O.B.E., J.P.

Councillors

A. G. ASQUITH-LEESON	A. F. BICKNELL	W. J. B. TITHERADGE
MRS. A. E. M. OLIVER, M.B.E.	F. A. CURREY	S. H. MONARD
P. W. FISHER	C. A. WORLEY	MRS. H. M. KER
C. W. NORTON-THOMAS	A. H. W. POPE	F. A. HARVEY
P. MCG. CORSAR	J. W. MOULDER	

The following ladies were co-opted to serve on the Committee
for housing purposes :

MRS. W. FIELDER ; MRS. A. E. FERGUSON-BAKER ; MRS. M. A. BROOKS

SENIOR MEMBERS OF HEALTH DEPARTMENT STAFF

*Medical Officer of Health,
Principal School Medical Officer,
Chief Administrative Medical Officer to the City Council and
Medical Officer of Health to the Port of Portsmouth*

T. E. ROBERTS, M.B., B.S., M.R.C.S., L.R.C.P., D.P.H.

*Deputy Medical Officer of Health and Deputy Principal
School Medical Officer*

R. WOODROW, M.B., CH.B., D.P.H.

*Senior Assistant Medical Officer of Health for Maternity and
Child Welfare*

RUBY N. E. PIKE, M.B., CH.B.

Vaccination and Immunisation Medical Officer

G. E. SHAND, M.D., CH.B., D.P.H. (to 30/4/53)

J. C. MILNE, M.B., CH.B., D.P.H., D.T.M. & H. (from 13/4/53)

*Assistant Medical Officer of Health and Assistant Maternity and
Child Welfare Officer*

AUDREY E. STEWART, M.B., CH.B., D.R.C.O.G.

Veterinary Officer

R. SCOULAR, M.R.C.V.S.

Chief Sanitary Inspector

W. F. APPLETON, M.R.San.I., F.S.I.A.

Administrative Assistant

H. S. WOODCOCK

Superintendent Health Visitor

MISS E. M. BUSSBY, S.R.N., S.C.M., H.V.Cert., D.N. (Lond.)

Supervisor of Midwives

MISS D. J. KINSEY, S.R.N., S.C.M., M.T.D.

Supervisory Matron of Day Nurseries

MRS. D. A. STRANGE, S.R.N., C.M.B. (Part I) (to 16/9/53)

(Note—Duties taken over by Superintendent Health Visitor)


Joint Appointments with Regional Hospital Board

Consultant Chest Physician

J. H. DADDS, M.B., B.S., M.R.C.P.

Chest Physician

A. M. READ, M.R.C.S., L.R.C.P.



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Public Health Department,
Municipal Offices,
1 Western Parade,
Portsmouth.

*To the Chairman and Members of the Health Services Committee, and to the
Chairman and Members of the Health and Housing Committee.*

My Lord Mayor, Ladies and Gentlemen,

I have the honour to present the Annual Report on the Health of the City for 1953, which follows the lines indicated by the Ministry of Health.

Figures in brackets represent the corresponding numbers or percentages for the previous year.

HEALTH STATISTICS

(Pages 24 – 29)

The Registrar General's return for the year 1953 reveals an increase of 3,200 in the total population (including Service personnel), which is now estimated to be 245,800. Although by the end of the year some 7,590 post-war properties were let, including 1,043 requisitioned premises, there were still at that time 15,079 applicants on the list for re-housing (including 736 aged persons). It is, however, pleasing to report that the acceleration of the Health and Housing Committee's building programme, which was noticeable in 1952, was fully maintained in the year under review. New dwellings were completed at the average rate of 60–70 per month in the first half of 1953, and of 120 per month during the second half of the year. At the present time over 2,300 new dwellings are actually under construction, and the completion rate is expected to average approximately 140 new dwellings per month during 1954.

As will be seen from Table I on page 26, the following are the main features of interest for the year under review :—

1. A slight decrease in the birth rate from 15·43 in 1952 to 15·21 per thousand population, compared with 15·5 for England and Wales in 1953.
2. A decrease in the maternity mortality rate from 0·78 per thousand total births in 1952 to 0·52 (the lowest ever recorded), compared with 0·76 for England and Wales.
3. A further decrease in the neo-natal mortality rate from 15·22 per thousand live births in 1952 to 14·98, compared with 17·7 for England and Wales.
4. A slight increase in the infant mortality rate from 23·24 (the lowest ever recorded) per thousand live births in 1952 to 23·80, compared with 26·8 for England and Wales.
5. An increase in the general death rate from 10·77 (the lowest ever recorded) per thousand population in 1952 to 11·59, compared with 11·4 for England and Wales.

6. A death rate from the principal infectious diseases of 0·04 per thousand population in 1953, the same as in the previous year and both the lowest ever recorded.

7. A further decrease in the death rate from all forms of tuberculosis from 0·255 per thousand population in 1952 to 0·21 (the lowest ever recorded), compared with 0·20 for England and Wales.

8. A slight increase in the death rate from cancer (including leukaemia) from 1·95 per thousand population in 1952 to 1·97, compared with 1·99 for England and Wales.

Consideration of the foregoing statistics, together with the summaries and tables on pages 24–29 of the Report, shows that the maternal mortality rate and the death rates from the principal infectious diseases and from tuberculosis were all the lowest ever recorded ; thus, it may well be claimed that, so far as serious illness and mortality were concerned, 1953 was an exceptionally healthy year for the citizens of Portsmouth.

There was, however, some increase in the incidence of minor illnesses causing absence from work of insured persons – mainly in the first quarter of the year, and reflecting the influenza outbreak of that period. These points are apparent from the weekly returns of “New claims to sickness benefit”, kindly supplied by the local office of the Ministry of National Insurance, which show that in 1953 the weekly average of “new claims” was 633, compared with 525 in the previous year and 596 in 1951.

METEOROLOGY

The most striking feature of the meteorological statistics for 1953 is that the rainfall – 19·71 inches – was the second lowest recorded since 1890, the lowest ever being 14·00 ins. in 1921 – one of the four years having over 2,000 hours of sunshine ; there were in fact only 126 (156) days on which measurable rain, i.e. 0·01 inches or more fell. This figure shows a decrease of 8·42 inches compared with 1952 and is 6·97 inches below the average for the last 10 years (26·68). It would have been pleasing to report that the amount of sunshine registered was relatively high but this in fact was not so, the total of 1,791·5 hours being 5·8 less than the previous year, 2·2 below the last ten years’ average and 316·5 less than in 1911 – the highest ever recorded ; it is nevertheless interesting to note that the rainfall in that year was 30·06 inches – 10·35 more than in 1953. There were 275 days during the year which had 0·5 hours or more sun, compared with 289 in 1952.

The year 1953 saw the promotion of Portsmouth and Southsea from 21st to 16th place in the sunshine table of the genuine health resorts on the mainland, but we fell from 31st to 35th position amongst the 291 meteorological stations in the British Isles. The highest amount of sunshine recorded was 2,017·7 hours at Shanklin.

The following occurrences of phenomena are worthy of note :—

Snow or sleet on five occasions, compared with 11 in 1952 ; thunder on one occasion (12) ;

nine gales (20) ; 56 fogs (32) ; 73 ground frosts (51).

Prevailing winds were from the south-west quarter.

Temperatures generally were slightly higher than in the previous year, so that, taking things all round, the weather for 1953 was a little better than 1952. It can be said that the climate of Portsmouth and Southsea is both healthy and agreeable, the winters being comparatively mild and the

sea breezes sufficiently bracing to obviate excessive heat in summer. The City is fortunate in being sheltered to a large extent by the Isle of Wight on the south and by Portsdown Hill on the north, as a result of which it is comparatively free from strong winds and storms of any intensity.

NATIONAL HEALTH SERVICE ACT, 1946

Details have been given in previous Reports of the changes which took place in the administration of the health services and of the responsibilities devolving upon the local health authority when this Act came into operation on the 5th July, 1948, in accordance with the proposals submitted to the Minister in 1947–1948, and there was included in last year's Report (pages 9–29) a "Special Survey of Local Health Services provided under the National Health Service Acts" as existing at the end of 1952. Any subsequent developments are referred to in the sections which follow.

Cordial co-operation between the three main branches of the National Health Service on the lines indicated in the Special Survey (pages 10–12 of 1952 Report) has been maintained throughout the year, although there is little new to record. It has been decided to issue a comprehensive Health Services handbook giving details of the services for which the Portsmouth Group Hospital Management Committee, the Executive Council and the Authority are responsible; this will be published in the autumn of 1954.

(1) SECTION 21 (HEALTH CENTRES)

No further progress has been made regarding the provision of health centres, either at Paulsgrove or elsewhere, but in the City Development Plan the erection of a health centre at Paulsgrove in 1955–1957 is included in the programme for the first five years; during the fifteen-year period commencing 1st April, 1958, it is hoped to provide three principal health centres – for the Central and Southern, North Portsea, and Cosham areas respectively, and subsidiary health centres at Southsea, Milton, Copnor and Farlington.

(2) SECTION 22 (CARE OF MOTHERS AND YOUNG CHILDREN)

SECTION 23 (MIDWIFERY)

SECTION 24 (HEALTH VISITING)

(pages 33–40)

Since 1950 the annual totals of live births have been remarkably constant at a lower post-war level, i.e. 1950 – 3,653, 1951 – 3,677, 1952 – 3,744 and 1953 – 3,739, compared with 5,149 in 1947, when the highest birth rate since 1920 was recorded. Thus, the birth rate for the year under review was 15·21 per thousand population, compared with 15·43 in 1952.

Domiciliary confinements numbered 1,578 (1,438), equal to 41% (37·7%) of the total births – the highest proportion delivered since the war by municipal midwives – while of the remainder approximately 35% of patients were confined in the maternity section of Saint Mary's Hospital and its annexes, and 883 or 23% in private nursing homes (including the Royal Naval and Royal Marine Maternity Home). The average number of cases attended by each municipal midwife in the year was 85·7 (85·1).

MATERNAL MORTALITY

There were only two deaths in respect of which pregnancy was considered to be the primary cause – one due to septicaemia following an abortion, the other to pulmonary embolism three days after confinement and attributed

to thrombosis of the leg veins. Thus, the maternal mortality rate was 0·52 per thousand births – the lowest ever recorded.

INFANT MORTALITY

The death rate of infants under one year – 23·80 per thousand live births – was also very favourable, having been excelled by a small margin only on two previous occasions: in 1948 when the infant mortality was 23·28 and in 1952 when the lowest rate ever recorded was reached – 23·24.

DAY NURSERIES

In view of the decreasing demand for places, following the introduction of a new scale of assessment in March which increased the weekly charges considerably for all but the lowest income-groups, three of the day nurseries were closed during 1953 – Garfield Road in March, and Clifdale and Portsdown Hill at the end of August. In the remaining three nurseries 116 places are now available: Twyford Avenue – 40, St Peter's – 46 and Anglesea Road – 30, compared with 246 previously available.

NURSERIES AND CHILD MINDERS REGULATION ACT, 1948

Four premises, providing accommodation for 32 children, were visited, inspected and registered under the Nurseries and Child Minders Regulation Act, 1948. At the end of 1953 there were in all fifteen premises registered under this Act providing private day nursery accommodation, the total number of places being 292.

Three daily minders were registered to receive nineteen children.

HEALTH VISITING

At the end of the year 22 health visitors were employed, compared with 20 in 1952, and the total visits paid numbered 58,028 (58,432), of which 50,031 were to children under five, 3,172 to other age groups, especially the aged, and 4,825 to persons suffering from tuberculosis.

(3) SECTION 25 (HOME NURSING) (page 41)

The Portsmouth Victoria Nursing Association, founded in 1884, which had for many years prior to the “appointed day” provided a very efficient service of home nursing in the area, has continued this service under the general control of the Authority. As will be seen from the report of the Secretaries (page 41), an average of 35 (32) nurses was employed, 18 (15) at Radnor House and 17 (17) at Beddow House, the total number of cases attended being 5,613 (5,476) and visits paid 100,073 (100,882).

Nursing equipment is supplied on loan to patients from a stock held by the Victoria Nursing Association; this is additional to that issued from the medical loan depots of the St. John Ambulance Brigade and British Red Cross Society.

(4) SECTION 26 (VACCINATION AND IMMUNISATION) (pages 42–45)

(a) VACCINATION

The proportion of infants vaccinated during the first year of life in 1953 showed an increase – 1,321 vaccinations, or 35·4% of the total births, compared with 31·0% in the previous year; of this number 902 infants were vaccinated by their “private doctors” and 419 by medical officers of the Health Department. Total vaccinations numbered 3,488 (3,324) of which 2,584 (2,323) were primary and 904 (1,081) re-vaccinations.

(b) IMMUNISATION

In his most interesting report (pages 42–45), the Medical Officer in charge of Vaccination and Immunisation has reviewed the working of the scheme for diphtheria immunisation (commenced in 1935) during the past decade and the results achieved in reducing the incidence of and the mortality from diphtheria.

During the year 3,243 (3,214) children received a complete course of immunisation against diphtheria and 5,292 (6,551) a supplementary injection. The total number immunised since the inception of the scheme is now 76,885. In addition, 1,407 (1,792) children – 1,360 (1,690) under five and 47 (102) aged 5–15 years – were fully immunised, by three injections, against whooping cough.

(5) SECTION 27 (AMBULANCE SERVICE) (pages 46–48)

During the year 63,730 (59,421) patients were conveyed – an increase of 7·2% compared with 1952 – of whom 15,102 were stretcher and 48,628 sitting cases. Patient carrying mileage was 244,182 (250,940) – a decrease of 2·6% – the average miles per patient being 3·8, compared with 4·2 in 1952.

The outstanding event of the year was the installation of radio-telephony on all vehicles, after a trial period of three months commencing in March, which proved so successful that your Committee had no hesitation in retaining this equipment. As will be evident from the statistics given above the increased efficiency gained by operating with radio-telephony resulted in a reduction of nearly 10% in the “average mileage per patient carried” – from 4·2 miles in 1952 to 3·8. Thus, it was possible for the Ambulance Service to deal with a greater number of patients, without increasing the staff or vehicle establishment, the total mileage being actually less than in the previous year.

(6) SECTION 28 (PREVENTION OF ILLNESS, CARE AND AFTER-CARE)

This Section, as its title implies, authorises the local health authority, with the approval of the Minister, to provide a comprehensive service for the improvement of public health in its area. This provision is permissive unless the Minister otherwise directs, and up to the present such directions have been given in respect of tuberculosis alone.

The proposals submitted to and approved by the Ministry of Health provided for the full utilisation of the facilities of the Mass Radiography Unit in the diagnosis of chest diseases, the supply of milk to tuberculous patients, and the development of occupational therapy and rehabilitation in co-operation with the Tuberculosis Voluntary Care Committee. The system of domiciliary visiting has been extended by the appointment of tuberculosis visitors. Towards the end of 1949 a scheme was approved under this Section of the Act for vaccination against tuberculosis by B.C.G., a method of which we had already some experience, as this preventive measure was commenced locally in 1946.

The Authority has not, as yet, developed any further extensive scheme for care and after-care, but consideration is given to cases requiring special attention, such as home help, supply of nursing equipment or convalescent treatment, and in the care of the aged in their own homes the scope of the health visitor's work is continually increasing. In addition, a considerable proportion of the work of the Mental Health Service (pages 60–61) is concerned with the “care and after-care” of persons suffering from

mental defect or mental illness under this Section of the Act.

Although the establishment of local authority medical loan depots and the extension of those already operated by voluntary organisations was envisaged in the proposals, the financial position has not allowed this. Nursing equipment has, therefore, continued to be issued on loan by the Victoria Nursing Association, the St. John Ambulance Brigade and the British Red Cross Society. Some items of equipment are, however, supplied by the Local Authority for the permanent use of patients nursed in their own homes, charges, where appropriate, being made in accordance with the Authority's approved scale of assessment. Convalescent home treatment is also provided for patients in need of recuperative rest after illness or operation, on the recommendation of either a medical practitioner or a hospital medical officer; here, again, a charge is made if the patient's means allow it.

TUBERCULOSIS (pages 49–53)

As will be evident from Table IV on page 29, the mortality from tuberculosis in Portsmouth has progressively declined in the last fifty years and is now less than one-seventh of that obtaining at the beginning of this century. This steady decline was interrupted by the first World War and, to a lesser degree, by the second, but since 1947 the downward trend has been resumed and has, indeed, become more rapid during the last five years.

In earlier reports, the Consultant Chest Physician, Dr. Dadds, has attributed the recent decline in deaths from this disease to the extended use of the new anti-biotic drugs – particularly streptomycin – and from his report for 1953 it will be seen that the total deaths from pulmonary tuberculosis during the year, 46, were less than half the figure for 1949, 98. The number of new cases discovered has, however, risen to 260, which is due in some measure to the increase in facilities for diagnosis. Contact examination has rightly been pursued with vigour and has been fruitful in discovering new cases. Follow-up is made of the contacts of persons dying whose tuberculous disease was not discovered or notified during life.

All school leavers are given the opportunity of mass radiography examination and excellent attendances are made, but very few cases have been discovered in this way. Children are also referred when necessary for X-ray examination from periodic medical inspection in schools and from school clinics. The principal of one small private school was found to have pulmonary tuberculosis, and all the children under her care were referred to the Chest Clinic with, happily, negative results. All incoming teachers to the Local Education Authority must have had a satisfactory chest X-ray report within the year previous to taking up duty, and they are encouraged to have X-ray check-ups every year – special sessions being set aside at the Mass Radiography Unit for this purpose. Cases of pulmonary tuberculosis occurring in teachers and others associating with children in schools are discussed with the Chest Physician and if needed a special survey is undertaken. This has not proved necessary in the past year, except as stated above.

The Almoner's report (page 53) deals fully with the question of employment and welfare, and of the invaluable assistance of the Disablement Resettlement Officer.

MASS RADIOGRAPHY (pages 54–59)

During the year the Mass Radiography Unit operated in the City, with the exception of fourteen weeks when surveys were made in seven areas including Gosport, Fareham, Lancing and Chichester.

A total of 46,058 (45,049) examinations was carried out during the year, the highest number ever recorded, including 34,092 (26,552) in Portsmouth ; of these 99 (83) persons were found to have *active* pulmonary tuberculosis – equal to a rate of 2·9 (3·1) per thousand examined – thus continuing the welcome decline in the proportion of cases of active disease found, a fall noted for the first time in 1951. Once again the most fruitful source of referral for discovering active cases was from general practitioners – the 2,414 (1,981) referred by them for investigation at the Unit resulting in the diagnosis of 37 cases of active disease or 15·33 (14·1) per thousand examined.

HEALTH EDUCATION

In addition to the important continuous activities that are carried on from year to year (e.g. the display of posters, distribution of leaflets, giving of lectures and the circulation of the exhibition stand), the following items of special interest occurred :

Filmstrip Projector

An excellent machine was obtained in April and has been extensively used by the health visitors, midwives, Ambulance Officer and other members of the staff. A library of filmstrips on various subjects is being built up.

Measles

The analysis of the local measles pattern, which had made possible the preparation of posters, leaflets and vehicle bills in readiness for the large outbreak in the winter 1952–53, was written up as a paper “A New Look at Measles”, which was published in *The Medical Officer* of 26th September, 1953.

Health Services Handbook

A new edition (the third) was published in September and has been distributed to selected bodies, such as the medical and auxiliary professions, schools, large firms, trade unions, voluntary bodies, etc., who have found it very useful.

Mass Radiography

Appointments bureaux were again successfully held before the general public sessions in November. This year thanks are due to Messrs. J. Woodhouse and the P.I.M.C.O. for the generous facilities afforded in the use of their premises.

Posters

Efforts were made throughout the year to obtain new posters for display at the child welfare centres, etc., and I am grateful in particular to the Danish Bacon Company and the Dental Board of the United Kingdom for copies of their excellent productions.

(7) SECTION 29 (DOMESTIC HELP) (page 35)

The Home Help Service provides domestic assistance in households where such help is required “owing to the presence of any person who is ill, lying-in, an expectant mother, mentally defective, aged, or a child not over compulsory school age”. The experience of the past year has shown that an increasing number of old people is being looked after by this Service, so

much so that, as will be seen from the report of the Senior Assistant Medical Officer of Health for Maternity and Child Welfare, some 70% of the time of the home helps is now devoted to them ; there is no doubt that this assistance is greatly appreciated and does help in no small measure to alleviate the lot of those who find it difficult to fend for themselves.

An ancillary to the Home Help Service is the "Dirt Squad", a small group of volunteers who work in pairs and undertake the cleaning of exceptionally dirty, and often verminous, households – usually when the occupant has been in hospital and is due for discharge; these helps are paid 6*d.* an hour extra.

Talks were given during the year by members of the nursing staff on the care of old people and chronic sick, tuberculous and maternity patients and it was found that helps were very interested and greatly benefited from them.

During the year, home helps, who are all part-time, attended 593 cases and worked $74,334\frac{1}{4}$ hours, compared with $59,500\frac{1}{2}$ in 1952, and at the end of the year 54 were employed.

(8) SECTIONS 28 & 51 – PART V OF THE ACT (MENTAL HEALTH SERVICES) (pages 60–61)

The proposals approved included the formation of a Mental Health Sub-Committee of the Health Services Committee, which is responsible for all the duties, chiefly domiciliary services, of the local health authority, i.e., the "ascertainment" of cases of mental ill-health and mental deficiency, the statutory supervision and guardianship of mental defectives living in the community, obtaining detention orders, sending persons of unsound mind and mental defectives to mental hospitals and certified institutions, and the provision of after-care for persons who have undergone treatment for mental illness. Through the Regional Hospital Board arrangements were made for the services of the specialist medical and lay staff of St. James' Hospital to be available for out-patient psychiatric services and for the existing staff of psychiatric social workers, together with the recently appointed "Authorised Officers", to be used in connection with the care and after-care of persons suffering from mental illness or defectiveness.

Until the 31st October, 1952, the Service was organised on the basis of a joint-user agreement between the Local Health Authority and the Regional Hospital Board, and was thus able to deal with the problems of mental health from every aspect, and was the link between the in-patient and out-patient treatment and after-care facilities of the Regional Hospital Board at St. James' (Mental) Hospital, and Saint Mary's (General) Hospital and the community care arrangements of the Authority.

The user of the Local Health Authority staff by Saint Mary's Hospital relates only to the supervision of mental defectives on licence from that hospital, and continues to exist ; but during 1952, although so far as the Local Health Authority was concerned, the arrangement for joint-user of specialist and lay staff with St. James' Hospital produced in practice, as in theory, the most excellent results, the Management Committee of St. James' Hospital sought the termination of the arrangement on the grounds of economy.

Further details of the service can be obtained by referring to the Executive Officer's report on pages 60–61.

CARE OF THE AGED

The problem of the care of old people has been causing increasing

concern in recent years, and towards the end of 1953 it was decided by the Health Services Committee, as a result of a conference convened by the Portsmouth Council for Social Service, that representatives of various interested bodies in the City should be invited to attend a meeting to discuss the present facilities for the care of old people, methods of improving them, and means of establishing closer co-ordination between the local authority, hospital and voluntary services interested in the problem. This meeting was held early in 1954, when a most fruitful discussion took place, and many helpful suggestions were made for the extension and improvement of the present arrangements.

So far as the Local Authority is concerned, the body responsible for the institutional care of aged persons is the Welfare Services Committee (under Section 21 of the National Assistance Act, 1948), but the Health Services Committee is also concerned, inasmuch as it is responsible for the Home Help Service, a large proportion of the time and activities of which is devoted to old people. Also under the control of the Health Services Committee is the Home Nursing Service, provided by the Victoria Nursing Association, which takes a large part in the care of infirm old people at home.

The Welfare Services Committee continued with their programme for the provision of hostels for old people. The two hostels already established, St. Bernard Lodge, Merton Road, with accommodation now for 42 old people, and St. Vincent Lodge, Kent Road, were fully occupied. Extensions at the latter home are in progress at present and, when completed, will provide an additional 14 places, making a total of 35 elderly persons accommodated there. One new home at Wymering and one at Farlington are under construction, and plans are already being made for the provision of another two. The additional accommodation provided by the adaptations to St. Mary's House came into use during the year, and further adaptations are envisaged. Unfortunately, these premises remain somewhat overcrowded due to the large number of bedridden and semi-bedridden patients it has been necessary to admit, thus curtailing the accommodation available to the more able-bodied inmates as sitting rooms, etc. The extensions at the Jubilee Homes for the Blind are now complete and accommodation is available for 28 elderly and infirm blind persons.

Of the voluntary bodies, the Old People's Welfare Committee of the Portsmouth Social Service Council continued to expand and extend their assistance to elderly persons. Their hostel, Sunbury Court, providing accommodation for 26 old ladies, has been constantly full since opening in 1950, and in addition the Committee find individual accommodation for old people who would be either unsuitable for admission to hostels or for whom a place is not available; they also help in finding suitable nursing homes in certain cases. Four of the five bungalows which the Committee are providing for elderly married couples in Northern Parade were nearing completion at the end of the year, and at the time of writing have actually been occupied. Recreational activities include parties, outings, the provision of wireless, food parcels, and many other forms of social service, including eight "Good Companions" Clubs, all of which have long waiting lists and are self-supporting. The Committee maintain a close liaison with hospital almoners and health visitors, and are often able to assist in cases referred to them from these sources. They also undertake a good deal of friendly visiting and, in short, co-operate generally with all other bodies, official and voluntary, who are interested in the welfare of old people. Since it commenced its work the Committee have long realised the need for "Half-way Houses", i.e. accommodation for elderly people who do not need hospital care but are not fit to

enter a hostel or remain at home, and it is now hoped a plan for such accommodation will be evolved in the near future.

The Women's Voluntary Services, who are responsible for the administration of Queen Anne Lodge, Nightingale Road, Southsea, providing accommodation for 20 elderly persons in need of care and attention, but able to pay towards their own maintenance, are also active in this field of social service. They run a "meals on wheels" service, delivering a two-course meal at a very reasonable charge to home-bound old people twice a week, and have operated a mobile library for old people for some time, in conjunction with the City Librarian. This service proved so popular that it was necessary to divide into two sections, north and south, and send out additional supplies of books. Their four "Darby and Joan" clubs have a membership of about 700 and a waiting list, and members of the service are always willing to undertake friendly visiting of lonely old people.

SECTION 47, NATIONAL ASSISTANCE ACT, 1948

Section 47, which gives local authorities power to effect the removal to hospital of persons who, because of grave chronic disease, or being aged, infirm or physically incapacitated and living in insanitary conditions, are unable to devote to themselves, and are not receiving from other persons proper care and attention, was amended by the National Assistance (Amendment) Act, which came into force on 1st September, 1951. Briefly, this means that it is now possible to arrange for the removal of persons in need of care and attention immediately; formerly it was necessary to give seven clear days' notice.

No less than six cases were dealt with under this Section of the Act, most of them elderly people in need of care and attention living alone, but one was that of a comparatively young woman suffering from tuberculosis who refused to accept treatment and had no one to care for her at home. Although she had repeatedly refused to enter hospital it was found once an Order had been obtained and her admission effected she settled quite happily in the ward and it was not necessary to obtain an Extension Order in this case.

Many other cases were investigated and visits made by health visitors, sanitary inspectors and members of the medical staff to elderly persons living alone or receiving inadequate care. The number of cases dealt with, particularly by health visitors, has increased tremendously, and it is estimated that some 2,000 visits were made by them in connection with the care of old people during 1953. Action taken to remedy the unsatisfactory conditions found in some of these homes included the provision of home help or home nursing, supply of clothing and bed linen through voluntary agencies or the National Assistance Board etc. Some were persuaded to enter St. Mary's House voluntarily, and many others are still being kept under regular supervision, so that further action may be taken should conditions deteriorate.

EPILEPTICS AND SPASTICS

Epileptics

In a school population of 32,000, there are some 65 children known to the School Health Service who are suffering from epilepsy. These are mostly minor cases and are being educated in ordinary schools—their disability not causing interference with their own or their class-mates' education. In addition, three children with severe epilepsy are in Boarding Special Schools

for epileptic pupils.

Most persons suffering from epilepsy are under treatment by their own general practitioner and/or St. James' Hospital, where there is a specialist in this complaint. Some 100 patients of all ages attend the hospital.

In common with all school leavers, epileptics are assessed regarding fitness for work and the relevant information and recommendation passed to the Youth Employment Officer. If necessary specialist advice is sought at this period.

Information from the Disablement Resettlement Officer shows that there are 99 persons suffering from epilepsy who are registered disabled persons – 72 males and 27 females – of whom an average number of 10 (mostly males) is unemployed. The D.R.O. sometimes experiences great difficulty in finding suitable employment for epileptics – potential employers being rather fearful of accepting them. A few are sent for rehabilitation and training, and five at the moment are employed at the Workshops for the Disabled in Portsmouth, which are run by the Welfare Services Committee of the City Council.

There are 68 epileptics of all ages under the supervision of the Mental Health Service; most of these persons are also in some degree mentally defective.

Spastics

In Portsmouth some 56 children are known to the School Health Authorities as suffering from cerebral palsy – 39 boys and 17 girls. They are all under the supervision either of the orthopaedic surgeons of Lord Mayor Treloar Orthopaedic Hospital or of the Physical Medicine Specialist of the Portsmouth Group Hospital Management Committee. Many of the more severe cases also attend for physiotherapy at the school clinics or at local hospitals. Those requiring speech therapy have this at school clinics or in school.

Arrangements for their education are at present as follows:—

	BOYS	GIRLS	TOTAL
Attending ordinary school	21½*	9	30½
In a special class	3	—	3
At the Fitcher School of Recovery	3	2	5
Private tuition at home	6½	2	8½
Ineducable	3	4	7
At Alton	1	—	1
At home but not receiving any tuition (under treatment at Bobath Clinic)	1	—	1
	39	17†	56

* One boy is receiving half his education at home and half at school.

† One girl, age 7 years, is awaiting admission to a residential special school.

In December, 1952, the Alton Surgeon examined and classified all known cases of cerebral palsy in the entire area served by the Lord Mayor Treloar Orthopaedic Hospital. Twenty-one Portsmouth children were then considered suitable for trial in a cerebral palsy unit which it was hoped to establish at Alton (this unfortunately did not materialise). Recently, a meeting was held between representatives from the Western Area Committee of the Regional Hospital Board (Secretary), Portsmouth Group Hospital Management Committee (Director of Physical Medicine and Secretary), Orthopaedic Surgeons from Lord Mayor Treloar Hospital, Hampshire

Education Committee, Portsmouth and District Spastics Society and Portsmouth City Council (Chief Education Officer and Principal School Medical Officer), when the question of setting up a local spastic unit was thoroughly discussed, and it was agreed that the various authorities would collaborate with the Spastics Society to establish a unit at which educational facilities and hospital treatment would be available for the spastic child.

The Mental Health Service has 44 cases of cerebral palsy under its supervision – either statutory or voluntary. Many of these are included in the table printed above. There are 16 on the Mental Health Service register who are over school-leaving age, and of these 13 are under statutory supervision and 3 under voluntary supervision. Of these one is working, one attends the Day Training Centre and one is still having specialised home teaching from the Education Department.

Those spastics who have been under supervision at the special orthopaedic sessions at the school clinic whilst attending school still continue to be seen after leaving by the orthopaedic surgeons and their welfare is assured in this way. Several of these cases are working in a variety of occupations.

BLIND PERSONS

Under Section 29 of the National Assistance Act the Welfare Services Committee is responsible to the Council for the welfare of the blind ; the information given in the appended table regarding registered blind and partially sighted persons has accordingly been provided by the Director of Welfare Services :—

A.—FOLLOW-UP OF REGISTERED BLIND AND PARTIALLY SIGHTED PERSONS

(i) Number of cases registered during the year in respect of which para. 7 (c) of Forms B.D.8 recommends :	Cause of Disability			
	Cataract	Glaucoma	Retrolental Fibroplasia	Others
(a) No treatment ..	4	3	—	43
(b) Treatment (medical, surgical or optical) ..	7	6	2	18
(ii) Number of cases at (i) (b) above which on follow-up action have received treatment	3	5	1	11

B.—OPHTHALMIA NEONATORUM

(i) Total number of cases notified during year	4
(ii) Number of cases in which :—	
(a) Vision lost	NIL
(b) Vision impaired	
(c) Treatment continuing at end of year	

It will be noted that only four cases of ophthalmia neonatorum were notified during the year, compared with 14 in 1952, and in none of these was there any impairment of vision.

There have been no cases of retrolental fibroplasia since September, 1952, when it became obvious that excessive concentration of oxygen in the Oxygenaire boxes was responsible for the condition and simple practical steps were taken to obviate this.

PREVALENCE OF, AND CONTROL OVER, INFECTIOUS DISEASES (pages 62-69)

The number of cases of infectious diseases as a whole has shown an increase, mainly accounted for by whooping cough (634 : 181) and measles (2,920 : 2,618) ; an increase is also noted in the number of cases of scarlet fever (341 : 237). The most marked decrease was in dysentery (14 : 132). One case of diphtheria was notified from a Service establishment and was treated in a Service hospital.

One death was attributable to measles and three to whooping cough ; none to scarlet fever or dysentery.

Puerperal pyrexia showed a decrease (85 : 99), as did ophthalmia neonatorum (4 : 14).

Four cases of paratyphoid fever were notified to the Registrar General, including one carrier. They were all sporadic cases.

Portsmouth was again fortunate in that there was no major outbreak of poliomyelitis. This name is gradually superseding the previous one – infantile paralysis – for the disease now affects all age groups of the population and not only children as the previous name suggested. 36 Portsmouth cases were admitted to the Infectious Diseases Hospital as suspected poliomyelitis and 13 cases were confirmed – ten of paralytic type and three non-paralytic. There were 3 deaths (including 1 home case) – all in adults. To cope with any overwhelming epidemic – such as occurred in Copenhagen in 1952 – polio diagnostic centres, of which the Infectious Diseases Hospital, Portsmouth, was one, were established throughout the country and very detailed plans made for the allocation and interchange of staff and special apparatus (particularly breathing machines).

The closest co-operation exists between the Physician Superintendent, Infectious Diseases Hospital, and this Department. Notice of provisional diagnosis is given when patients are admitted and any change of diagnosis is notified as soon as possible. Home conditions are reported on to the Infectious Diseases Hospital in certain cases, when requested, so that children may be discharged to the most favourable conditions possible.

CANCER (page 65)

The death rate from this disease, which now includes leukaemia, showed a slight increase from 1·95 per thousand population in 1952 to 1·97 for the year under review ; this represents a total of 483 (472) deaths. Consideration of the table on page 65 gives a more detailed analysis of this figure, and reveals that, while the total deaths from cancer of the stomach show a welcome decrease – 60 compared with 87 in the previous year and 72 in 1951 – there has been a considerable increase in those due to malignant disease of the uterus (31 : 22) and to cancer of the lung in both sexes – males 70 : 61, females 18 : 10.

The appended table shows the dramatic decline in recent years in deaths from respiratory (pulmonary) tuberculosis, compared with the marked increase in those from cancer of the lung, which in 1953 numbered 70 in males and 18 in females ; the former figure is now more than twice the

mortality from pulmonary tuberculosis, the latter approximately the same.

Year	Males		Females		Total Deaths	
	T.B.	Cancer	T.B.	Cancer	T.B.	Cancer
1948 ..	69	27	51	12	120	39
1949 ..	62	47	36	7	98	54
1950 ..	56	58	31	9	87	67
1951 ..	39	66	21	11	60	77
1952 ..	40	61	11	10	51	71
1953 ..	30	70	16	18	46	88

CANCER EDUCATION

A policy of cautious development was again followed by the Portsmouth Cancer Education Committee, and steady progress resulted.

In September the Committee affiliated with the Marie Curie Memorial Foundation, which is the national body most active in the field of cancer education at the moment. Leaflets continued to be circulated – including a new set of 12 published by the M.C.M.F. during the year. A lecture “Cancer in Women” was given in March by Dr. Norman Parfit, at which an American talking film “Time is Life” was shown.

In the autumn a circular was issued by the Ministry of Health which, in brief, encouraged local health authorities to carry out exploratory schemes of cancer education, in co-operation with the appropriate hospital authorities and medical committees. In this matter Portsmouth can claim to have anticipated the Ministry by some two years.

Proof of the progressively more favourable attitude of the local medical profession to the work of the Committee was evinced by the fact that Mr. Bernard Williams, F.R.C.S., kindly consented to address the Annual General Meeting in November on “Some Surgical Aspects of the Cancer Education Problem”, under the chairmanship of Dr. F. R. Langmaid, O.B.E., J.P.

VENEREAL DISEASE (page 66)

There is very little change in the numbers of cases treated at the V.D. Treatment Centre from those noted last year. During the year 39 cases of syphilis of all stages, 81 cases of gonorrhoea and 333 other conditions had treatment. Portsmouth statistics compare very favourably with those of other large towns of a similar size and with other seaports.

It is pleasing to report that the defaulter rate is so low and that the tracing of contacts is well done in Portsmouth. The sooner contacts can be traced and persuaded to have an examination and treatment if required, the less danger there is of the spread of these diseases.

It would appear that congenital syphilis has been almost stamped out. This is in very large measure due to the routine ante-natal examination made of all expectant mothers by general practitioners and at the ante-natal clinics.

PARASITIC INFESTATION (pages 67–69)

(a) SCABIES

The incidence of scabies in the community still remained fairly high, 87 cases and 82 contacts being treated during the year, compared with 109

cases and 100 contacts in 1952 ; in 1947, however, cases numbered 656 and contacts 521 – an aftermath of the war years.

(b) PEDICULOSIS (Lice)

Cases of pediculosis showed a gratifying decline, 175 families and 675 individuals being dealt with, compared with 274 families and 1,039 persons in 1952 ; 61 (96) families had been treated on at least one previous occasion.

PUBLIC BATHS

(pages 70–72)

The financial year 1953–54 was the most favourable ever experienced in the history of the Park Road Baths, total patronage attaining the record figure of 119,963 – an increase of 22,196 on the previous year, and the revenue of £4,730 10s. 2*d.* being £834 12s. 6*d.* more. These excellent results must be attributed in the main to the enthusiasm and enterprise of the new Baths Superintendent and his staff, and fully justify the modest expenditure incurred by your Committee in 1949 by the installation of modern filtration and chlorination plant for the swimming pool.

Modernisation of the private hot baths section has been deferred pending a decision with regard to the completion of the new Anglesea Road Baths in which it is now hoped to include these facilities.

INSPECTION AND SUPERVISION OF FOOD

(pages 73–77 and 85–89)

The total number of samples of food and drugs was 1,835, an increase of 170 when compared with the number taken in 1952. Of this number 96 or 5·2% were found to be adulterated or incorrectly labelled, compared with 8% for the previous year.

All the adulterated samples were dealt with by cautions or referred to the appropriate Ministry.

FOOD AND DRINK INFECTIONS – 1953

No case of typhoid occurred in 1953. Four sporadic paratyphoid B cases were admitted to hospital, the source of infection remaining undiscovered, although careful investigation of each patient's history of movement and diet was undertaken. Two of the patients had been in contact although this evidence was somewhat tenuous, but no further linking of the cases could be discovered. Specimens submitted for bacteriological investigation included such varied items as cockles, chipolatas, cream buns, caramels, houseflies and sea water, with negative results.

Two outbreaks of food poisoning, one major and one minor, involved in the first instance 50 school children and staff of a school meals canteen, and in the second instance a small party of holiday makers. In the major outbreak, although immediate bacteriological examination of the patients' stools was made, again a negative result was experienced. A possible source of infection existed in a septic cut on the finger of one of the servers and it is possible that the outbreak was attributable to an unidentified toxin.

The minor outbreak appeared to be attributable to an infection from one of the staff of the cafe at which the party of holiday makers had their meal.

A number (28) of cases of salmonella typhi-murium were similarly investigated, but as has been the general experience in these investigations no sources of infection were discovered in these single cases. Several healthy excretors were discovered but the possible vehicles of infection, such as ducks eggs, cream and other buns, flour, sausages, sweets, etc., were examined without positive results.

There was a marked decline in the number of sonn  dysentery cases.

SANITARY CIRCUMSTANCES

(pages 78-92)

WATER SUPPLY

There is no change to be recorded regarding the water supply, which continues to be of excellent character, both in purity and quantity. The results of the Public Analyst's chemical and bacteriological examinations are referred to on page 112.

HOUSING

The City Architect has supplied the following information regarding housing progress during the year :—

1,273 houses were completed during 1953

2,536 were under construction

459 were under contract, but building not started.

DISPOSAL OF THE DEAD

MORTUARY ACCOMMODATION

The number of bodies received into Park Road mortuary during the year was 372, compared with 310 in 1952. The proposed scheme detailed in the Report for 1950 to extend and modernise the existing mortuary at Saint Mary's Hospital has again been under consideration, and it has now been agreed that the City Council should share with the Regional Hospital Board the capital expenditure of approximately £11,392 thereby involved. It is hoped that this work may commence in April, 1955. When the new mortuary is brought into use the existing Public Mortuary will be closed, except that it will be used temporarily for the viewing of bodies in connection with the Coroner's inquests until such time as alternative arrangements are made for this. Meantime, certain minor improvements to the mortuary at Saint Mary's Hospital have been made, including the provision, in 1952, of a body refrigerator and, more recently, new mortuary tables, sanitary services and a viewing room.

CREMATORIUM

The need for a crematorium to serve an area of this size and to reduce the demand for land for cemetery purposes has been mentioned in many previous Reports. A site at Cornaway Lane, Fareham, of five acres has now been approved by the Minister of Housing and Local Government, and has been acquired on behalf of the Joint Committee of the authorities concerned — Fareham, Havant, Gosport and Portsmouth. Preliminary plans have recently been considered and will shortly be submitted to the Minister for approval.

ACKNOWLEDGMENTS

Once again I would record my appreciation of the assistance and encouragement given by the Chairmen and members of the Health Services and Health and Housing Committees. Thanks are also due to the Town Clerk and other chief officials of the Corporation for their help and advice so willingly given ; to my medical colleagues in the City for their helpful co-operation ; to the Medical Director of the Pathological Service, and to the various voluntary organisations in Portsmouth. I should also like particularly to express my gratitude to the Physician Superintendent of the Infectious Diseases Hospital for his assistance with epidemiological investigations, and to the Director of the Public Health Laboratory, Portsmouth, for his expert help in connection with enquiries into cases of infectious disease.

Special thanks are due to my Deputy (Dr. Woodrow), the Chief Sanitary Inspector (Mr. Appleton) and my Administrative Assistant (Mr. Woodcock) for their valuable assistance throughout the year, and I would again record my appreciation to the staff of the Health Department for their willing service.

I have the honour to be, my Lord Mayor, Ladies and Gentlemen,

Your obedient servant,

T. E. ROBERTS.

July, 1954.

ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH

STATISTICAL SUMMARIES FOR 1953

Total Population (estimated by the Registrar General) .. 245,800

GENERAL STATISTICS

Area in acres (land and inland water)	.. .. .	9,222
Population (Census 1951 – preliminary figure)	.. .. .	233,464
Number of houses (including pre-fabricated bungalows)	..	54,655
Number of flats	.. .. .	5,497
Rateable value (31st March, 1953)	.. .. .	£1,896,329
Nett product of a Penny Rate (year ended 31st March, 1954)	..	£7,680
Average number of persons in each house (Census 1931)	..	4.5
Average number of persons per acre (Census 1931)	.. ..	31.3
Total rainfall	.. .. .	19.71 inches

EXTRACTS FROM VITAL STATISTICS

	<u>Total</u>	<u>Male</u>	<u>Female</u>	
LIVE BIRTHS :				
Legitimate ..	3,500	1,803	1,697	Rate per 1,000 population <u>15.21</u>
Illegitimate ..	239	123	116	
Total	3,739	1,926	1,813	

STILLBIRTHS :				
Legitimate ..	99	42	57	Rate per 1,000 total births <u>28.58</u>
Illegitimate ..	11	5	6	
Total	110	47	63	

DEATHS	2,850	1,488	1,362	Rate per 1,000 population <u>11.59</u>
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Deaths from :

(a) Complications of pregnancy and delivery	1
(b) Other complications of the puerperium	1
		<u>2</u>
		Total

Maternal mortality rate per 1,000 total births 0.52

Death rate of infants under one year of age :

All infants per 1,000 live births (89)	.. .. .	23.80
Legitimate infants per 1,000 legitimate live births (83)	.. ..	23.71
Illegitimate infants per 1,000 illegitimate live births (6)	.. ..	25.10

PROPORTION OF DEATHS FROM PRINCIPAL DISEASES

TOTAL — 2,850

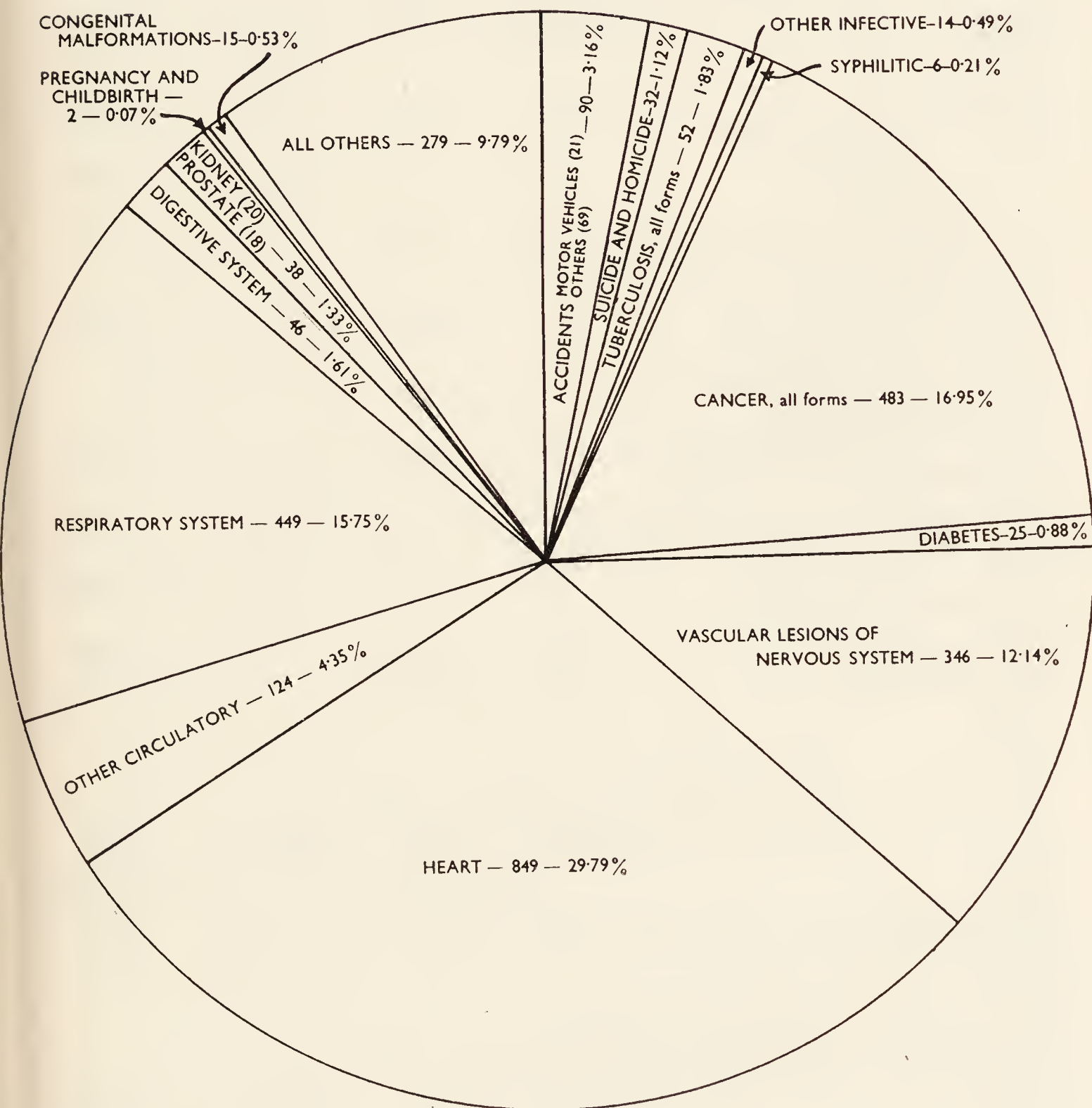


TABLE I
COMPARISON WITH PREVIOUS YEAR (1952)

	1953 Population 245,800		1952 Population 242,600	
	Number	Rate per 1,000 living	Number	Rate per 1,000 living
Births	3,739	15·21	3,744	15·43
Deaths	2,850	11·59	2,614	10·77
„ Principal Zymotic				
Diseases	10	0·04	10	0·04
„ Smallpox	—	—	—	—
„ Measles	1	0·00	—	—
„ Scarlet Fever	—	—	—	—
„ Diphtheria	—	—	—	—
„ Whooping Cough	3	0·01	1	0·00
„ Fever (Typhoid and Para-Typhoid)	—	—	—	—
„ Enteritis and				
Diarrhoea (under 2)	6	0·02	9	0·04
„ Pulmonary Tubercu- losis	46	0·19	51	0·21
„ Other forms of				
Tuberculosis	6	0·02	11	0·045
„ Cancer (including Leukaemia)	483	1·97	472	1·95
„ Influenza	56	0·23	2	0·01
	Number	Rate per 1,000 live births	Number	Rate per 1,000 live births
Deaths under 1 year of age..	89	23·80	87	23·24
	Number	Rate per 1,000 total births	Number	Rate per 1,000 total births
Deaths—Maternal :				
Sepsis	1	0·26	1	0·26
Other Causes	1	0·26	2	0·52
Total	2	0·52	3	0·78

TABLE II

TABLE SHOWING BIRTH-RATE, DEATH-RATES AND POPULATION
FOR YEAR 1953 AND THE TEN PRECEDING YEARS

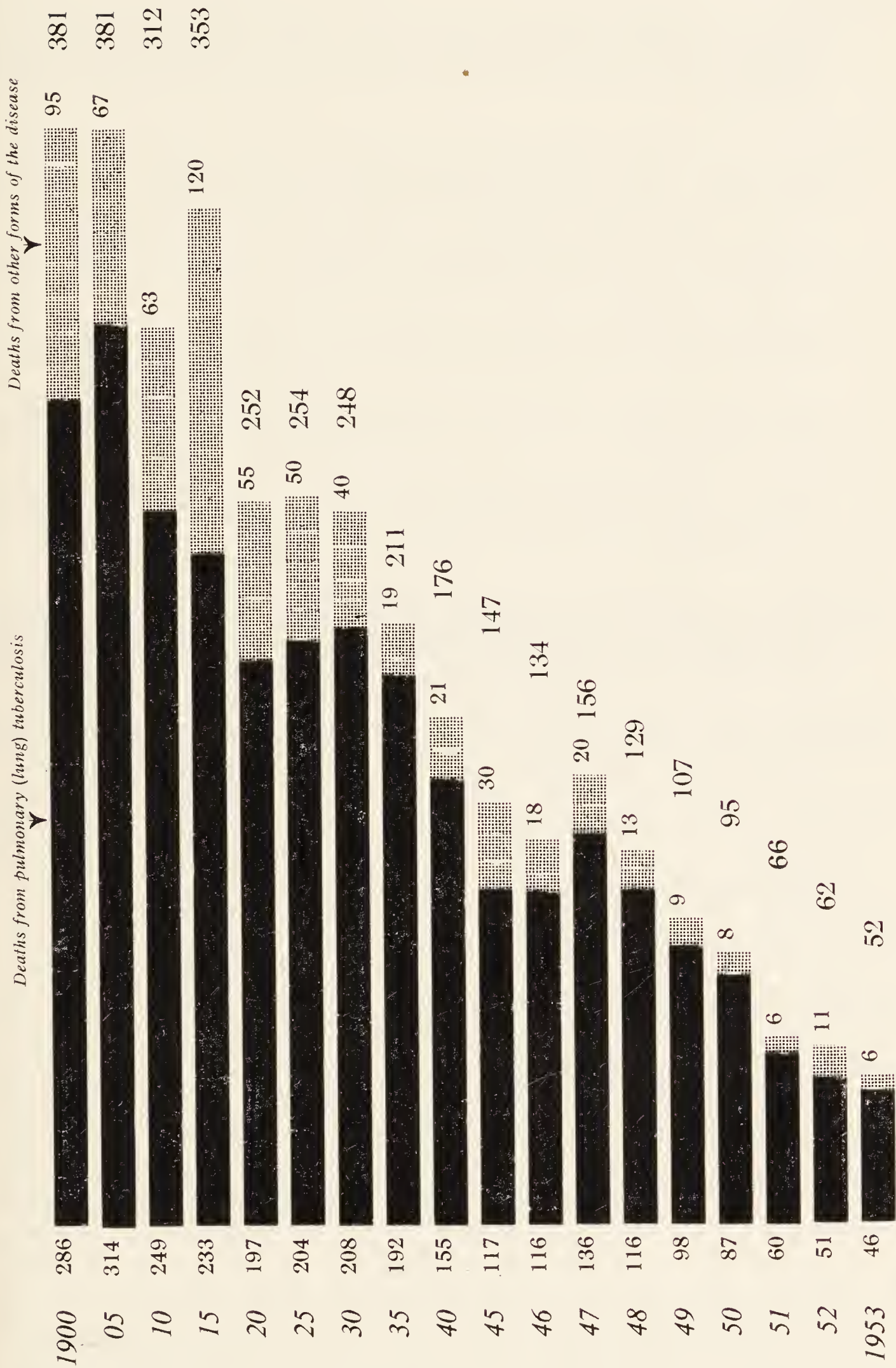
Year	Birth-rate per 1,000 population	Death-rate per 1,000 population	Death-rate from zymotic diseases per 1,000 population	Deaths of children under 1 year—percen- tage of total deaths	Deaths of children under 1 year —per 1,000 live births	Population (R.G.'s estimate)
1953	15.21	11.59	0.04	3.12	23.80	245,800*
1952	15.43	10.77	0.04	3.33	23.24	242,600*
1951	15.05	11.87	0.06	3.76	29.64	244,400*
1950	15.22	10.92	0.05	4.16	29.84	240,020*
1949	19.06	12.05	0.07	3.80	24.04	218,250
1948	21.06	11.01	0.06	4.45	23.28	216,200
1947	24.29	12.98	0.12	6.25	33.40	212,020
1946	23.69	12.13	0.07	6.65	34.05	204,540
1945	23.40	13.80	0.17	7.23	42.67	179,240
1944	23.53	15.23	0.17	6.95	44.98	155,860
1943	21.54	15.50	0.08	6.58	47.32	149,080
Average for 10 yrs. 1943-52	20.23	12.63	0.09	5.32	33.25	—

(The most favourable figures in the statistics are shown in heavy type) * Total populations.

TABLE III — TABLE SHOWING POPULATION, BIRTH-RATE, DEATH-RATE, ZYMOTIC DEATH-RATES, INFANT AND MATERNAL MORTALITY RATES OF THE 20 LARGE TOWNS OF ENGLAND AND WALES FOR 1953

Name of Authority	Population (Total)	Death-rates per 1,000 population from :														Still-birth Rate (per 1,000 total births)	Neo-natal Mortality Rate (per 1,000 live births)	Infantile Mortality Rate (per 1,000 live births)	Cancer (all forms including Leukaemia & Apleukaemia)	Tuberculosis- Non-respiratory	Tuberculosis- Respiratory	Enteritis and Diarrhoea (under 2 years)	Smallpox	Acute infectious encephalitis	Acute polio- myelitis and encephalitis	Measles	Influenza	Diphtheria	Whooping Cough	Scarlet Fever	Meningococcal Infections	Typhoid and Paratyphoid Fever	Adjusted Rates per 1,000 population	Maternal Mortality Rate per 1,000 total births
		Adjusted Rates per 1,000 population																																
		Birth	Death																															
CROYDON ..	249,800	13.7	10.5	—	0.00	—	—	0.32	0.00	0.00	—	—	—	0.016	0.12	0.00	2.16	21.0	14.0	23.3	0.85													
COVENTRY ..	263,000	15.2	10.7	—	—	—	0.015	0.095	—	0.004	—	—	—	0.019	0.15	0.02	1.66	33.4	24.7	19.8	0.47													
SOUTHAMPTON ..	177,100	15.85	11.08	—	0.006	—	0.017	0.152	0.006	0.006	—	—	—	0.040	0.327	0.017	2.230	33.16	22.22	26.78	1.37													
BRISTOL ..	444,200	15.47	11.23	—	0.002	—	0.004	0.162	0.004	0.011	0.002	—	—	0.007	0.209	0.027	1.887	21.89	15.12	17.82	0.99													
LEICESTER ..	286,500	15.72	11.30	—	0.014	—	0.007	0.101	—	0.0035	0.0035	—	—	0.014	0.244	0.021	1.864	24.80	15.44	27.09	0.85													
PLYMOUTH..	221,400	17.27	11.69	—	0.02	—	0.01	0.11	—	0.02	—	—	—	0.00	0.20	0.02	1.89	26.90	17.02	20.17	1.88													
NEWCASTLE-U-TYNE	289,700	16.55	11.88	—	0.003	—	0.003	0.058	0.007	—	0.007	—	—	0.014	0.280	0.041	2.095	26.82	19.91	23.4	0.593													
NOTTINGHAM ..	311,500	16.14	11.89	—	0.01	—	0.01	0.14	0.00	0.01	—	—	—	0.02	0.27	0.02	1.86	27.00	16.39	20.22	0.77													
BIRMINGHAM ..	1,118,500	15.94	11.91	0.00	0.01	—	0.01	0.15	0.02	0.00	0.01	—	—	0.02	0.24	0.01	2.00	26.12	18.04	23.46	0.58													
CARDIFF ..	246,600	17.39	11.93	—	0.008	0.004	0.008	0.11	0.01	0.004	—	—	—	0.036	0.29	0.028	1.97	26.92	15.82	21.90	0.00													
SUNDERLAND ..	181,550	19.7	11.98	0.00	0.02	0.00	0.00	0.07	0.01	0.01	0.00	0.00	0.00	0.03	0.26	0.01	2.00	37.9	18.9	21.0	0.55													
PORTSMOUTH ..	245,800	15.97	12.05	—	0.01	—	0.01	0.23	0.00	0.01	—	—	—	0.02	0.19	0.02	1.97	23.80	14.98	28.58	0.52													
KINGSTON-U-HULL	299,400	19.1	12.4	—	—	—	0.01	0.15	0.00	0.01	—	—	—	0.02	0.25	0.04	1.84	35.2	21.7	27.3	1.36													
LEEDS ..	505,500	15.1	12.5	—	0.00	—	0.00	0.11	0.00	0.00	0.00	0.00	0.00	0.03	0.22	0.02	1.91	32.90	22.90	20.62	0.62													
LIVERPOOL ..	789,700	19.5	12.7	—	0.01	—	0.005	0.04	0.006	0.0038	0.001	—	—	0.03	0.33	0.03	1.97	35.5	21.8	24.0	0.30													
SHEFFIELD ..	507,600	13.76	12.73	—	0.006	—	0.008	0.083	—	0.006	—	—	—	0.022	0.193	0.018	2.126	25.66	16.30	25.15	0.55													
STOKE-ON-TRENT	273,700	15.79	13.25	0.0037	0.0073	—	—	0.084	0.0037	—	—	—	—	0.011	0.343	0.029	2.032	28.0	23.0	25.0	0.0													
MANCHESTER ..	701,800	16.54	13.66	—	0.01	—	0.01	0.15	0.00	—	0.00	0.00	—	0.01	0.28	0.03	2.16	30.53	20.87	28.24	0.80													
BRADFORD ..	286,600	16.0	13.8	—	0.007	—	0.007	0.132	—	—	—	—	—	0.007	0.14	0.03	2.3	37.0	24.5	19.5	0.21													
SALFORD ..	173,900	16.20	14.04	—	0.011	—	—	0.103	0.011	0.006	—	—	—	0.029	0.288	0.023	2.28	32.05	22.95	30.11	0.33													

TABLE IV DEATHS FROM TUBERCULOSIS 1900-1953



METEOROLOGY — 1953

BAROMETER. The mean barometric pressure (corrected to sea level) for the year was 30·035 inches (29·911). The highest observed reading was 30·752 on 10th March (30·669), and the lowest 28·468 on 10th February (29·009).

TEMPERATURES. The mean temperature in the shade was 52·0° (51·1°).
Maximum. The mean maximum temperature in the shade was 57·5° (56·4°), the highest being 80° on 29th and 30th June (86°).

Minimum. The mean minimum temperature was 46·4° (45·8°), the lowest being 25° on 8th February (24°).

Minimum on Grass. The mean minimum temperature on the grass was 41·2° (41·2°), the lowest being 15° on 8th February (19°).

Earth Temperature. The mean temperature at one foot below the ground was 52·9° (52·6°), and at four feet 53·3° (53·2°).

Frosts. The minimum temperature in the shade, four feet above the ground, fell to and below freezing point on 33 days (31), and there were 73 (51) ground frosts during the year.

SUNSHINE. 1,791 hours 30 minutes (1,797 hours 18 minutes) of sunshine were registered by the Campbell-Stokes recorder. The greatest amount on one day was 14 hours 30 minutes on 23rd June (15 hours 12 minutes).

RAINFALL. The total rainfall was 19·71 inches (28·13). The greatest fall in twenty-four hours was 0·97 inches on 22nd September (0·97).

HUMIDITY. The mean humidity of the air (saturation 100) was 81 (78).

The following phenomena were recorded :—

HAIL on five occasions (4).

SNOW or SLEET on five occasions (11).

THUNDER on one occasion (12).

FOGS. Fifty-six (32).

GALES. Nine — 3 fresh, 6 moderate (twenty — 12 fresh, 8 moderate).

AVERAGES FOR THE PAST TEN YEARS (1944–53)

Rainfall	Sunshine	Mean
26·68 inches	1,793·7 hours	52·0°

(Figures in brackets refer to 1952)

TABLE V
MONTHLY METEOROLOGICAL SUMMARY FOR THE YEAR 1953

Month	Mean Pressure (ins.)	Mean Temp. F.	Absolute		Mean		Mean Daily Range	Sunshine		Rainfall			Relative Humidity (Satura- tion 100)
			Max. F.	Min. F.	Max. F.	Min. F.		Total No. of Hours	Days of 0.5 hrs. or more	Total m.m.	Total ins.	Days of 0.01 ins. or more	
January..	30.133	39.3	53	27	43.7	34.9	8.8	44 hrs. 12 mins.	14	28.4	1.12	10	87
February	30.068	39.9	54	25	44.7	35.1	9.6	77 " 48 "	18	30.4	1.20	9	82
March ..	30.363	42.5	59	27	49.8	35.2	14.6	162 " 54 "	28	9.7	0.38	4	79
April ..	29.852	48.4	68	32	54.4	42.4	12.0	208 " 30 "	26	32.2	1.27	14	72
May ..	30.047	56.2	73	39	63.5	48.9	14.6	236 " 12 "	28	59.5	2.34	9	74
June ..	29.891	60.0	80	43	66.4	53.6	12.8	227 " 0 "	28	35.5	1.40	13	78
July ..	29.891	61.9	74	53	67.0	56.7	10.3	201 " 18 "	28	63.5	2.50	14	79
August ..	30.018	63.9	77	50	70.1	57.7	12.4	263 " 6 "	29	39.8	1.57	8	79
September	29.917	59.8	75	47	65.5	54.1	11.4	176 " 6 "	28	66.2	2.60	13	79
October	30.041	54.1	68	41	59.7	48.5	11.2	111 " 6 "	22	77.5	3.04	11	84
November	30.103	50.0	59	38	54.3	45.6	8.7	49 " 6 "	14	41.4	1.63	11	87
December	30.114	47.5	58	35	51.2	43.7	7.5	34 " 12 "	12	16.5	0.65	10	89
TOTAL	—	—	—	—	—	—	—	1,791 hrs. 30 mins.	275	500.6	19.71	126	—
MEAN	30.035	52.0	80	25	57.5	46.4	11.1	149 hrs. 18 mins.	23	41.7	1.64	10.5	81

TABLE VI
MONTHLY ANALYSIS OF WIND DIRECTIONS - 1953
(recorded at 9 hours, G.M.T.)

1953	N	NE	E	SE	S	SW	W	NW	Calm	Totals
January ..	5	4	—	4	—	4	7	3	4	31
February ..	4	6	—	—	—	6	4	4	4	28
March ..	7	3	2	1	2	10	4	—	2	31
April ..	1	8	5	2	2	10	1	1	—	30
May ..	1	2	—	4	1	10	7	3	3	31
June ..	1	5	2	1	2	7	3	7	2	30
July ..	—	3	—	—	3	19	6	—	—	31
August ..	—	3	1	2	4	11	7	1	2	31
September ..	—	3	3	2	1	9	6	3	3	30
October ..	4	8	2	—	4	4	1	2	6	31
November ..	—	3	1	1	1	14	2	3	5	30
December ..	3	4	2	2	—	5	3	4	8	31
TOTALS ..	26	52	18	19	20	109	51	31	39	365
% (nearest whole Nos.) ..	7	14	5	5	5	30	14	9	11	100

MATERNITY AND CHILD WELFARE

*By the Senior Assistant Medical Officer of Health
(Maternity and Child Welfare)*

CARE OF MOTHERS AND YOUNG CHILDREN**MATERNAL MORTALITY**

The maternal mortality rate showed a decrease from 0·78 per thousand total births in 1952 to 0·52, the lowest ever recorded. This represents a total of two deaths, the causes of which were as follows :—

- (a) Streptococcal septicaemia following abortion due to natural causes and probably accelerated by her having caught a mild form of scarlet fever. P.M. and Inquest.
- (b) Pulmonary embolism due to crural phlebo-thrombosis from natural causes. P.M. without inquest.

Investigation into the above cases shows that in case (a) the patient was admitted to hospital desperately ill, with a four-day history of fever, diarrhoea, purpura and oedema of arms and legs. She denied any question of an abortion having taken place. The onset of septicaemia was obviously very acute, but earlier admission to hospital might have allowed effective treatment to be given.

In case (b) the patient received appropriate treatment throughout her ante-natal period, confinement and the few days following labour. It is difficult to say how this maternal death could have been avoided.

INFANT MORTALITY

The infant mortality rate for 1953 showed a slight increase — 23·80, compared with 23·24 in 1952; the actual number of infant deaths was 89 (87). An analysis of these figures (page 39) shows that in 1953 the deaths occurring in the first four weeks of life numbered 56, and those from four weeks to one year 33 (comparable figures in 1952 were 57 and 30), making a neo-natal death rate of 14·98 in 1953, compared with 15·22.

PREMATURE BIRTHS

Special visits were made by midwives and health visitors to all premature babies. A premature baby outfit, including cot equipment, etc., is supplied by the local authority and is available for nursing premature babies on the district.

The total number of premature births reported during 1953 occurring at home and in nursing homes was 109 (74). Of those born at home 2 (1) died during the first twenty-four hours, 1 (1) between the second and eighth days, 59 (35) were still surviving at the end of the month and 18 (17) were transferred to hospital. Of those born in nursing homes no baby died during the first twenty-four hours, 23 (18) were surviving at the end of the month, and 6 (2) were transferred to hospital.

OPHTHALMIA NEONATORUM

During the year 4 (14) cases of ophthalmia neonatorum were notified. There was no resultant impairment of vision in any of these cases.

ATTENDANCES AT CLINICS

There was a very slight decrease in the number of new patients attending the municipal ante-natal clinics in 1953 — 1,714, compared with 1,766 in

1952. During the year patients made a total of 13,017 attendances, compared with 13,480.

The number of patients attending the post-natal clinics for the first time increased slightly to 325, compared with 322 in 1952. Patients made a total of 523 attendances, compared with 554 in the previous year.

The child welfare clinics continued to be well attended as will be seen from the table on page 00. There was an increase in the total attendances made by children – 62,460, compared with 60,877 in 1952.

MOTHERS' CLUBS

Mothercraft talks by health visitors and midwives are given weekly at Trafalgar Place, Clive Road, Child Welfare Centre and are well attended. Mothers' clubs continue to meet at Portsea and Cosham Child Welfare Centres. Talks are given on health education, cooking, etc., and appear to be greatly appreciated.

SUPPLY OF VITAMINS

Facilities continue to be available at the child welfare clinics for the issue of vitamins, etc., supplied by the Ministry of Food.

NURSERIES

During the year the total number of children under five years of age admitted to the day nurseries was 183 (322). Three day nurseries were closed during the year, because of the decrease in the demand for places resulting from the introduction of the increased scale of charges in March. In the remaining three day nurseries 116 places are now available.

Medical officers of the Health Department regularly carried out medical examinations at Annesley House residential nursery.

DENTAL TREATMENT

Dental care of expectant and nursing mothers and of young children continues to be carried out mainly by the hospital authorities. During the year 516 cases were referred from the local authority's clinics, compared with 453 cases in 1952.

MIDWIVES SERVICE

The total number of domiciliary midwives who sent in their notification to practise during 1953 was 25 ; of this number 22 belong to the Portsmouth Municipal Service, and three are district midwives who practise privately. The total number of cases delivered by municipal midwives was 1,578 (1,438) and by independent midwives 18 (35) ; the former figure represents an average of 85.7 (85.1) cases per midwife per annum.

Close liaison is maintained between the maternity section of the Health Department and the hospital maternity booking office. The Supervisor of Midwives continues to make investigations into home conditions in cases where admission to hospital is sought on grounds of unsuitable accommodation at home.

The domiciliary service of midwives continues to undertake the district training of pupil midwives for their Part II examination. During the year thirty-three pupils entered for the examination, 26 being successful at their first attempt.

ANALGESIA IN CHILDBIRTH

There was an increase in the number of cases in which gas and air

analgesia was administered on the district. The percentage of cases to whom this form of analgesia was administered in 1953 was 87·5, compared with 83·9 in the previous year.

The administration of pethidine by the midwives continues to be most successful and much relief has been brought to mothers in labour.

The following is an analysis of cases :—

Gas and air and pethidine used	..	..	847
Gas and air alone used	..	..	533
Pethidine alone used	..	..	32

The remaining number of cases – 166 – were those in which a different form of analgesia was used, those where for medical reasons it was contra-indicated, those in which the delivery was too rapid, and those where the mothers preferred to have no analgesia.

DOMESTIC HELP SCHEME

The above scheme continues to work satisfactorily ; all cases receiving assistance are carefully selected and supervised.

The following table gives the result of a survey which was made of the Home Help Service during the first seven months of the year, with special reference to the types of cases helped and the number of hours allocated to them.

DOMESTIC HELP SERVICE

No. of cases assisted — January to July, 1953

Old Age	..	..	34 cases	} 177	3,562 hours worked	} 26,208
Old Age & Chronic Sick	143	..	..		22,646	
Tuberculosis	..	..	23	} 46	5,122	} 8,086
Temporary Illness	..	..	23		2,964	
Maternity	..	..	46	..	3,085	.. 8·0%
Old age and chronic sick average hours per case over above period						148 hours
Tuberculosis and temporary illness						176
Maternity cases						68

An analysis of the statistics of the Domestic Help Service for the year 1953 is as follows :—

Number of home helps at the end of the year	..	54
Number of maternity cases helped	..	132
Number of tuberculosis cases helped	..	35
Number of chronic sick cases helped (including aged and infirm)	..	352
Number of other cases of illness helped	..	74
Number of hours worked for maternity cases	..	4,814 $\frac{1}{4}$
Total number of hours worked	..	74,334 $\frac{1}{4}$ (59,500 $\frac{1}{2}$)

HEALTH VISITING

The number of health visitors employed at the end of the year was 22 (20), of whom one was employed as full-time and five as part-time tuberculosis visitors. There were also two trained nurses engaged as full-time tuberculosis visitors.

The total number of visits paid was 58,028, compared with 58,432 in 1952.

The number of visits paid to children under five years of age during 1953 was 50,031, compared with 52,442 in the previous year. 3,172 (2,103) were paid to other age groups in the family, especially the aged, and 4,825 (3,887) to tuberculosis patients.

The Health Visitor Training Course continued at Southampton University and the scheme of "assisted course" students is still proving helpful in maintaining the supply of health visitors.

MATERNITY AND CHILD WELFARE STATISTICS

CHILD WELFARE CENTRES

The number of attendances, new cases and children seen by the Medical Officers at the Child Welfare Centres functioning during the year are set out below :—

	Attendances	New Cases	Seen by the Medical Officer
Fratton (two afternoons per week)	10,589	642	1,285
Epworth Road (one afternoon per week) ..	9,351	425	718
Drayton (one afternoon per week)	3,202	164	451
Eastney (two afternoons per week)	14,217	746	1,188
Portsea (one afternoon per week)	4,402	392	648
Stamshaw (one afternoon per week)	7,640	399	668
Tangier Road (one afternoon per week) ..	5,134	189	386
Cosham (one afternoon per week)	3,710	285	606
Paulsgrove (one afternoon per week)	4,215	255	528
TOTALS	62,460	3,497	6,478
TOTALS for 1952	60,877	3,445	6,738

Attendances at Child Welfare Centres during the year 1953, classified according to the age of the child concerned, were as follows :—

Children from 0 to 1 year of age	47,382
„ „ 1 to 2 years of age	9,859
„ „ 2 to 5 years of age	5,219
Total	62,460
Total for 1952	60,877

Dried milk was issued from the Child Welfare Centres to expectant mothers, nursing mothers and infants, at a total cost of £3,972 (£4,160) ; £4,325 (£4,608) was recovered from the patients.

DAY NURSERIES

The following are the statistical details relating to the six Day Nurseries established in Portsmouth :—

	Admissions during the year	No. on Register at 31st Dec.	Awaiting admission 31st Dec.
GARFIELD ROAD DAY NURSERY (Complement 40)	6	Closed 31/3/53	} Nil.
CLIFFDALE DAY NURSERY (Complement 60)	12	Closed 31/8/53	
ST. PETER'S DAY NURSERY (Complement 46)	62	33	
TWYFORD AVENUE DAY NURSERY .. (Complement 40)	51	31	
ANGLESEA ROAD DAY NURSERY (Complement 30)	44	21	
PORTSDOWN HILL DAY NURSERY .. (Complement 30)	8	Closed 31/8/53	

MIDWIVES

The practice of district midwives and of those practising in nursing homes during the year was satisfactory, and the inspection of midwives' bags, books and appliances was carried out regularly.

	1953	1952
Number of midwives practising on the district and in nursing homes on December 31st	36	35
Total number of cases attended by them	2,479	2,239
Number of cases attended by municipal midwives	1,578	1,438
" " " " independent midwives	18	35
" " " " in nursing homes	883	766
Number of midwives' cases in which medical assistance was sought	272	273
Showing a percentage of	21.4	15.2

DOMICILIARY SERVICE OF MIDWIVES

	1953	1952
Number of municipal midwives employed in Portsmouth at 31st December	22	21
Number of cases booked	2,210	2,078
Number of patients delivered	1,578	1,438
Excluding holidays and sickness :		
Average number of cases per midwife per month	7.1	7.1
Average number of cases per midwife per annum	85.7	85.1
Average weekly number of bookings	42.5	39.9

ANTE-NATAL AND POST-NATAL CLINICS

Details of the work carried out at Ante-Natal and Post-Natal Clinics during the year are given below : —

	ANTE-NATAL				POST-NATAL			
	No. of new Patients		Total Attendances		No. of new Patients		Total Attendances	
	1953	1952	1953	1952	1953	1952	1953	1952
Fratton A.N., 5 clinics weekly) .. (P.N., 1 clinic weekly)	1,045	1,097	8,663	8,444	277	266	380	437
Cosham (A.N., 2 clinics weekly) .. (P.N., 2 clinics monthly)	424	410	2,596	2,828	48	60	143	117
Portsea (A.N., 1 clinic weekly) ..	245	259	1,758	2,208	—	—	—	—
Saint Mary's Hospital (A.N., 9 clinics weekly) .. (P.N., 2 clinics weekly)	1,304	1,243	14,887	17,196	1,272	1,762	1,272	1,844
TOTALS	3,018	3,009	27,904	30,676	1,597	2,088	1,795	2,398

INSTITUTIONAL TREATMENT OF MATERNITY CASES

	Saint Mary's Hospital	Royal Naval Maternity Home
No. of maternity beds (exclusive of isolation and labour)	80	17
No. of patients admitted	2,243	330
Average duration of stay	10·6 days	14 days
No. of cases delivered by—		
(a) Midwives	1,487	279
(b) Doctors	245	36
Cases in which medical assistance was sought by midwife	Doctor always available	177
No of cases notified as puerperal pyrexia	39	1
No. of cases of pemphigus neonatorum	—	—
No. of infants not entirely breast-fed while in Institution	402	24
No. of cases notified as ophthalmia neonatorum	—	—
No. of maternal deaths	—	1
No. of foetal deaths—		
(a) Stillborn	110	4
(b) Within 28 days of birth	72	1

HOME VISITING

The health visitors paid 58,028 (58,432) visits during the year :—

						Total Number of Visits	
						1953	1952
First visits to children	..	..	..	..	..	3,707	3,677
Subsequent visits to children from 0 to 1 year of age	..	..			..	15,919	17,398
„ „ „ from 1 to 2 years of age	..	..			..	9,404	9,831
„ „ „ from 2 to 3 years of age	..	..			..	8,158	8,135
„ „ „ from 3 to 5 years of age	..	..			..	12,843	13,401
Visits to expectant mothers	..	..	..	..	..	286	184
Visits in respect of home helps and the aged	..	..			..	2,886	1,919
Visits in respect of tuberculosis patients	..	..			..	4,825	3,887

INFANT MORTALITY, 1953

DEATHS FROM STATED CAUSES AT VARIOUS AGES
UNDER ONE YEAR OF AGE

Cause of Death	Under 1 week	1 to 2 weeks	2 to 3 weeks	3 to 4 weeks	Total under 4 weeks	4 weeks and under 3 months	3 months and under 6 months	6 months and under 9 months	9 months and under 12 months	Total Deaths under 1 year
Whooping Cough	—	—	—	—	—	—	2	—	—	2
Meningococcal Infections	—	—	—	—	—	—	1	1	—	2
Measles	—	—	—	—	—	—	—	—	1	1
Cerebro-vascular Haemorrhage ..	—	—	—	—	—	—	1	—	—	1
Heart disease	—	—	—	—	—	1	—	—	—	1
Pneumonia	7	2	1	—	10	4	6	2	—	22
Bronchitis	—	—	—	—	—	1	—	1	—	2
Gastritis, Enteritis and Diarrhoea	—	—	—	—	—	2	2	2	—	6
Congenital Malformations	5	4	—	—	9	1	1	—	1	12
Injury at Birth	7	1	—	—	8	—	—	—	—	8
Post-natal Asphyxia & Atelectasis	17	—	—	1	18	—	—	—	—	18
Immaturity	7	—	—	—	7	—	—	—	—	7
Other Causes	4	—	—	—	4	—	—	—	1	5
Accidents	—	—	—	—	—	2	—	—	—	2
TOTALS ..	47	7	1	1	56	11	13	6	3	89
Previous Year (1952)	41	6	8	2	57	10	13	3	4	87

DENTAL TREATMENT FOR EXPECTANT AND NURSING MOTHERS AND YOUNG CHILDREN

By the Senior Dental Officer

Under an arrangement made with the Portsmouth Group Hospital Management Committee regular sessions for the treatment of these patients are held at Saint Mary's Hospital dental clinic. All forms of dental treatment are provided including the supply of dentures and, when required, the facilities of the hospital's X-ray department are available.

In addition children under five not requiring a general anaesthetic other than "gas" are treated at the school clinics, but separate sessions are not held for them. They are mostly younger brothers or sisters of children attending school and are brought to the clinics by their parents when other members of the family are attending for treatment, whereas those going to Saint Mary's are usually referred there from the child welfare clinics, etc.

The general dental practitioners in the City have always given some priority to expectant mothers, so that those wishing to have treatment by the dentists of their choice have little difficulty in obtaining it; further, many practitioners do extractions for young children under a general anaesthetic at home in conjunction with the family doctor.

SCHOOL DENTAL SERVICE

DENTAL TREATMENT PROVIDED FOR PRE-SCHOOL CHILDREN
(approximate figures)

(a) Numbers provided with Dental Care :

Examined	Needing Treatment	Treated	Made Dentally Fit
147	85	74	56

(b) Forms of Dental Treatment provided :

Extractions	Anaesthetics		Silver Nitrate Treatment	Dressings
	Local	General		
59	48	11	10	5

SAINT MARY'S HOSPITAL DENTAL CLINIC

DENTAL TREATMENT PROVIDED FOR EXPECTANT AND NURSING MOTHERS
AND PRE-SCHOOL CHILDREN

(a) Numbers provided with Dental Care :

	Examined	Needing Treatment	Treated	Made Dentally Fit
Expectant & Nursing Mothers	170	162	139	139
Children under five	123	119	119	119

(b) Forms of Dental Treatment provided :

	Extrac- tions	Anaesthetics		Fillings	Scalings or Scaling and Gum T'ment	Silver Nitrate T'ment	Dress- ings	Radio- graphs	Dentures provided	
		Local	General						Com- plete	Partial
Expectant and Nursing Mothers	127	2	125	6	11	—	1	—	—	—
Children under five	117	—	117	1	—	—	—	—	—	—

HOME NURSING

The Secretaries of the Portsmouth Victoria Nursing Association, Messrs. Edmonds & Co., have kindly supplied the following report for 1953 :—

“The work of the Association continues to be heavy but it is encouraging to note that the staff position has improved during the year, mainly due to an intake of students at each of the homes. Nurses sent by other authorities, however, leave on completion of their course in district training and this may cause a temporary shortage of staff. In order to avoid this shortage it is still necessary to recruit staff who are prepared to work permanently in this area.

It is noted that over one third of the cases visited relate to people who are over sixty-five years of age. With the greater application of antibiotic drugs the number of visits to certain types of cases has been reduced and generally the rate of recovery has been quicker. In 1946 the average number of visits per case was 26, whereas in 1953 it was down to 17, according to an analysis of cases and visits at Beddow House.

The superintendents and staff continue to work in close liaison with all other branches of the health service with whom they are associated in carrying out their duties.

The Executive desire to record their thanks to our superintendents and nurses for the very efficient and untiring manner in which they have carried out their increased work.

The Executive also wish to thank the representatives of the Portsmouth Corporation, who have continued to offer us their help, and also the doctors and other social service workers for their willing help in giving lectures to candidates for the Queen's Roll”.

PORTSMOUTH VICTORIA NURSING ASSOCIATION

STATISTICS FOR 1953

			NURSES' HOMES					
			<i>Radnor</i>	<i>House</i>	<i>Beddow</i>	<i>House</i>	TOTAL	
Number of nurses employed for								
visiting (average)	..	..	18	(15)	17	(17)	35	(32)
Minimum in any one month	..	..	15	(12)	14	(14)	29	(26)
Maximum in any one month	..	..	20	(17)	20	(18)	40	(35)

Number of cases visited in 1953 :

(a) Maternity	17	(20)	21	(31)	38	(51)
(b) Pre-school children	287	(412)	188	(298)	475	(710)
(c) School children	230	(258)	156	(175)	386	(433)
(d) Tuberculosis	65	(42)	33	(25)	98	(67)
(e) Other cases	2,666	(2,552)	1,950	(1,663)	4,616	(4,215)
	3,265	(3,284)	2,348	(2,192)	5,613	(5,476)

Total number of visits in respect of these cases :

(a) Maternity	124	(154)	159	(1,087)	283	(1,241)
(b) Pre-school children	1,429	(2,375)	1,184	(2,517)	2,613	(4,892)
(c) School children	1,125	(1,234)	1,029	(1,107)	2,154	(2,341)
(d) Tuberculosis	2,034	(882)	1,212	(265)	3,246	(1,147)
(e) Other cases	54,539	(51,373)	37,238	(39,888)	91,777	(91,261)
	59,251	(56,018)	40,822	(44,864)	100,073	(100,882)

VACCINATION AND IMMUNISATION

By the Medical Officer in Charge

Vaccination

The numbers vaccinated by medical practitioners and the Health Department were as follows :—

	1953			1952		
	Primary	Re-vacc.	Total	Primary	Re-vacc.	Total
Health Department..	906	476	1,382	659	358	1,017
Practitioners..	1,678	428	2,106	1,664	643	2,307
	2,584	904	3,488	2,323	1,001	3,324

Children born in 1953 numbered 3,739 (3,744) and, of these, 1,321 (1,161) or 35·4% (31·0%) were vaccinated in the same year.

In addition to the three weekly vaccination sessions at the Vaccination and Immunisation Clinic, Infectious Diseases Hospital, weekly vaccination is carried out at four child welfare centres. Vaccine lymph continued to be obtained from the Central Public Health Laboratory, Winchester. Vaccination is recommended at the age of 3–4 months.

In accordance with the Ministry of Health's recommendation, all persons at risk; e.g. the staff of the Health Department, including doctors, health visitors, sanitary inspectors, and ambulance drivers and attendants, are vaccinated yearly. The staff at Chapmans Laundry were vaccinated again this year.

Two hundred and sixty international vaccination certificates were completed for persons going abroad. These certificates are obtainable from travel agencies or the Ministry of Health. When completed by a private medical practitioner the certificate requires to be countersigned by the Medical Officer of Health.

Diphtheria Immunisation

The retirement of Dr. Shand at the end of April, 1953, after eleven years work building up the City's immunisation service, prompts a brief survey of what has been done over the past decade. The scheme for diphtheria immunisation was started in 1935 and, even prior to the war, no fewer than 17,000 school children and over a thousand under fives had been immunised in one year. In the use of a Mobile Unit to visit outlying districts, following announcements in the press, at clinics, and on occasions by loud speaker and house to house calls by the district health visitors, Portsmouth may well claim to be one of the first authorities to undertake large scale immunisations in this way.

The following table indicates the work done since 1943 :—

Year	Completed Course	'Booster Doses'	Cases of Diphtheria admitted to Hospital	Deaths from Diphtheria
1943 ..	4,784	75	31	1
1944 ..	2,518	106	17	2
1945 ..	3,633	820	13	2
1946 ..	4,763	4,243	17	—
1947 ..	4,375	3,060	15	1
1948 ..	4,917	5,452	6	—
1949 ..	4,437	3,335	7	1
1950 ..	3,428	3,756	1	—
1951 ..	3,479	5,261	5	1
1952 ..	3,214	6,551	—	—
1953 ..	3,243	5,292	1 (Haslar)	—

The case of diphtheria admitted to hospital during the year was a Service man of 24 years of age.

The success of the campaign for mass immunisation, however, which has produced such a marked fall in the incidence and mortality of diphtheria, should not induce any feeling of complacency. Portsmouth has been fortunate indeed in its freedom from diphtheria. Experience in some other towns has shown that diphtheria can and still does occur in this country. In this connection the concluding words of the Medical Research Council Report on a Study of Diphtheria in two areas of Great Britain are well worth repeating. "The conviction remains that active immunisation is the best protection against diphtheria and that its application and maintenance on the widest possible basis should be the constant aim and purpose for the health endeavour in this field". To this end, at least 70% of the child population must be rendered and kept immune.

The proportion immunised by the various agencies (shown as a percentage of the total immunised) was :—

	1953	1952
Clinics	60.4	54.6
Schools	6.5	9.1
Mobile Unit	—	3.6
Nurseries	1.5	3.7
Private Practitioners	31.6	29.0

Number of children who received the complete course :—

Under five	2,605	2,553
Five to fifteen	632	651
Over fifteen	6	10
TOTALS	3,243	3,214
Supplementary doses	5,292	6,551
	8,535	9,765

Total number of children immunised since the inception of the scheme in 1935 – 76,885.

At the request of the Ministry of Health, a complete survey of the immunisation records has been made. This shows that the percentage of children under one year immunised is 8.2, between one and four years – 69, and between five and fourteen – 78, giving an overall percentage of 70.2.

REACTIONS

As in previous years reactions have been recorded and classified as mild, moderate or severe. The great majority fall into the mild group as shown in the following table :—

	Mild	Moderate	Severe	Total
First diphtheria	3	—	—	3
First combined	5	—	—	5
Second diphtheria	—	—	—	—
Second combined	4	—	—	4
Third combined	1	1	—	2
Supplementary	29	13	2	44
TOTAL	42	14	2	58

POLIOMYELITIS AND IMMUNISATION

None of the twelve poliomyelitis cases admitted to the Infectious Diseases Hospital from the City had been immunised during the previous six months.

Reports in the medical press on post-injection paralysis and the increased incidence of poliomyelitis in the country during the second half of the year gave rise to anxiety in connection with the immunisation work. It is generally accepted that immunisation may activate polio virus or localise it. The antigens incriminated have included diphtheria A.P.T., pertussis vaccine and combined diphtheria-pertussis vaccine. In a World Health Organisation Technical Report on Diphtheria Pertussis Vaccination, published in May, 1953, it is stated that the effectiveness of diphtheria-pertussis immunisation should be disturbed as little as possible by the fear of subsequent poliomyelitis and that such immunisation should be carried out during the polio season, but if the disease assumes epidemic proportions all immunisations should be temporarily suspended. In Portsmouth, although there was no unusual increase in the number of polio cases, the following precautionary measures were taken from the second half of July to the end of the first half of October. Immunisation with combined diphtheria-pertussis vaccine and pertussis vaccine was stopped, although children already under a course of immunisation with the combined vaccine had their course completed; P.T.A.P. was used as the antigen for diphtheria immunisation; with the closing of the schools for the summer holidays "booster" doses to all school children were stopped. The campaign was again stepped up at the end of October by advertisement in the press, use of a slogan on Corporation letters, personal propaganda by health visitors and personal contact with teaching staff in schools. It was found that numbers increased considerably at clinics for about a week after an advertisement had appeared in the press.

PROCEDURE

The antigens used for diphtheria immunisation are Glaxo combined vaccine, A.P.T., and P.T.A.P. for older children. Careful records are kept, starting with a register of births. When a child completes a course of immunisation this information is entered therein. When the child reaches its first birthday, a check is made and, if he has not been immunised, his name is placed on a list for enquiry by the district health visitor who advises on the necessity for immunisation and gives an appointment for attendance at a convenient clinic or school. If the child still does not attend, a letter is usually sent to the parents, again giving details of the nearest clinic and urging attendance. Supplementary or "booster" doses are given at the age of 5 years – mainly to school entrants at infant schools and subsequently at 9 years of age and occasionally at 13. Schick testing is not done generally, but is done when immunisation of any adult is asked for.

The medical officer responsible visits regularly the network of immunisation clinics – 9 child welfare clinics weekly; 3 day nurseries and 50 schools monthly. Private schools are visited on request and domiciliary visits are paid when there is any difficulty in the mother getting to the clinics. On occasions a mobile unit is used. With the opening of a static weekly clinic in the Paulsgrove area the need for the mobile unit largely ceased. Private medical practitioners continue to be supplied with A.P.T. and pertussis vaccine as required.

Whooping Cough (Pertussis) Immunisation

Immunisation against whooping cough is carried out as a routine measure, usually combined with diphtheria immunisation, and is offered at six months. Parents are now keen on having their children immunised against whooping cough and ask for this rather than for diphtheria immunisation.

STATISTICS RELATING TO PERTUSSIS IMMUNISATION

	1953	1952
First doses	1,762	2,012
Second doses	1,575	1,974
Completed doses	1,407	1,792
Completed doses : Under five	1,360	1,690
Five to fifteen	47	102
	1,407	1,792

Typhoid, Typhus, Cholera and Tetanus

132 (282) individuals, mostly persons going abroad and mainly wives and families of service men, were vaccinated for one or more of the above diseases. The actual numbers were typhoid 78 ; cholera-typhoid 34 ; cholera 9 ; tetanus and typhoid 11.

43 international certificates for cholera were issued.

No inoculation for typhus was given during the year. Since October, 1952, no international certificate has been required for typhus or plague.

NEEDLE SHARPENING

This is undertaken at the clinic by the male orderly. The number of needles sharpened during the year was :—

	1953	1952
Maternity and Child Welfare ..	2,073	2,451
Victoria Nurses	1,342	845
Immunisation Clinic	1,540	1,100
	4,955	4,396

MUNICIPAL AMBULANCE AND MEDICAL CAR SERVICE

By the Ambulance Officer

GENERAL

The demands on the Ambulance Service during 1953 maintained an upward trend but, in comparison with 1952, this was not quite so steep; nevertheless, there is still no indication of demands levelling off or decreasing. This trend is mainly due to an increase of out-patients to the general hospitals, in particular Queen Alexandra Hospital. Hospital departments are still developing and, in my opinion, have not yet reached their peak. Some of the other hospitals show a slight decrease but, as aforesaid, the general trend is upward.

The peak hours of work remained similar to those in 1952, i.e. from 8.30 a.m. to 5.0 p.m., but the build-up at 10.0 a.m. and 1.30 p.m. was higher than in the previous year; consequently, at these times the ambulance service was fully stretched. Generally, however, between 8.30 a.m. and 5.0 p.m. the pressure was continuous, with approximately one patient conveyed every two minutes.

This year there was no seasonal decline during the holiday period; in fact, July had the highest number of patients ever carried in one month and generally throughout the year the level of patients per month remained fairly constant.

PATIENT CONVEYANCE

During this year there were 63,730 patients conveyed, being an increase of 7.2% over the previous year, the total comprising 15,102 stretcher cases and 48,628 sitting cases. Admissions showed an increase of 979 in comparison with 1952; the highest proportion of this increase was to Queen Alexandra Hospital and the Infectious Diseases Hospital. Other hospitals remained approximately the same. The ratio of sitting case to stretcher case admissions remained about the same as in previous years. Discharges increased by 784 and, although there was a slight increase in the number of stretcher case discharges, the main increase was sitting cases, and the ratio between stretcher and sitting case discharges remained much the same as previously. Inter-hospital transfers showed a decrease of 3,119, this being due to reduction of transfers carried out on behalf of the Chest Clinic and Royal Hospital. Outpatients increased overall by 5,665. This category of patient conveyance showed a considerable increase both in stretcher work and sitting case car work and was the greater bulk of the work done by the Ambulance Service.

The high number of sitting cases was due to the fact that there are approximately 30 different treatment departments within the City served by this Ambulance Service. Of the total patients conveyed, 76.4% were sitting cases and, of the total sitting cases conveyed, 72.8% were out-patients.

During 1953 patient carrying mileage was 244,182, this being a reduction of 2.6% in comparison with the previous year. Ambulances covered 128,121 miles and cars 116,061. This mileage reduction was due mainly to radio, which made it possible to switch vehicles from one area to another without having to return to the station.

There were 15,732 patient-carrying journeys during the year, of which 1,321 were to places outside the City – 204 being to places over 50 miles away, approximately half of them to the London area. In addition, 95 patients were transported by train to various places outside the City.

EMERGENCY SERVICE

During the year there were 2,312 calls, 2,192 patients and the mileage was 9,500. In comparison with 1952, calls increased by 274 (throughout the year there was only one malicious call), the number of patients increased by 260 and the mileage decreased by 616. In this category, 1,732 patients were taken to the Royal Hospital, 332 to Saint Mary's Hospital and 128 to their home addresses or other places. The average busiest days throughout the year were Tuesdays and Saturdays.

The number of patients and mileage are included in the previous paragraph.

RADIO

Radio-telephony was installed in all vehicles for a trial period commencing in March. It proved so successful that after two months it was decided to retain it.

No serious difficulties in operating it were experienced by the staff and speech procedure was mastered by them with a few days' experience. Initially, wholehearted co-operation by the staff assisted greatly in assessing its value. The installation of radio has :—

- (a) enabled normal commitments to be carried out with much less delay to patients.
- (b) enabled accident calls to be answered more expeditiously by the diversion of ambulances operating in the area of the accident.
- (c) made it possible to deal with an increased number of patients without increasing the staff or vehicle establishment.
- (d) enabled crews to report the condition of seriously ill patients whilst in transit and this information being passed to hospitals has allowed them to make necessary preparations.

The equipment supplied has proved to be very efficient and few faults have materialised, no undue strain on the vehicle batteries has been experienced and reception within the City has been excellent.

ANCILLARY WORK

There were 2,838 journeys covering 10,771 miles carried out on behalf of the Municipal Midwifery Service, 2 journeys covering 14 miles for the Immunisation Service, and abortive and service journeys covered 12,055 miles. The total ancillary mileage was 22,840.

CIVIL DEFENCE

During 1953 the mileage done in Civil Defence training was 22,340, of which 4,707 was by ambulances and 17,633 by cars. The ambulance mileage was mainly ambulance practice driving for those volunteers who held driving licences, whilst on the cars the main bulk of the driving was teaching non-drivers. In ambulance driving there were 41 students who put in 297 attendances, and 46 learner drivers who put in 1,206 attendances, whilst in other phases of ambulance work there were 151 students with 2,250 attendances.

VEHICLES

Throughout the year there was little mechanical trouble and, generally, the vehicles stood the burden very well, particularly the cars which had the additional task of Civil Defence learner-drivers.

The operational vehicles are all post-war, but, owing to the high mileage, a programme of replacement is now under consideration.

The total mileage for the year was 289,362 (ambulances 140,302 – cars 149,060).

STAFF

During the year the sickness rate was a little higher than in previous years but there was no absenteeism at any time and time-keeping was very good. Courses for the staff were mainly in Civil Defence subjects. The complement of staff was altered to give one additional charge-hand, with the reduction of one driver-attendant.

MUTUAL AID

Arrangements made in the past continued to operate satisfactorily. One new arrangement made during 1953 was that this Ambulance Service would convey premature babies requiring oxyginaire from the South-east Hampshire area into Saint Mary's Hospital.

VOLUNTARY ORGANISATIONS

The Hospital Car Service during this year conveyed 43 patients, covering 5,428 miles; St. John Ambulance Brigade conveyed 68 casualties, covering 744 miles, whilst the British Red Cross Society ambulance provided accident cover on Portsdown Hill during the holiday season. The co-operation of these voluntary organisations is good and they have accepted requests at very short notice.

STATISTICS RELATING TO THE PERIOD 1st JANUARY TO 31st DECEMBER, 1953

PATIENT CARRYING ANALYSIS

	Patients		Mileage	
Saint Mary's Hospital	20,699	(18,943)	73,035	(69,661)
Infectious Diseases Hospital	2,265	(2,280)	15,609	(12,507)
Chest Clinic	6,643	(8,628)	14,321	(17,723)
Royal Portsmouth Hospital	18,449	(17,086)	62,439	(66,385)
Queen Alexandra Hospital	7,401	(5,396)	32,320	(28,256)
St. James' Hospital	404	(487)	2,952	(5,025)
Eye and Ear Hospital	1,533	(1,222)	5,734	(5,758)
Ministry of Pensions	1,754	(1,818)	6,815	(9,859)
Nursing Homes	328	(269)	2,348	(2,300)
Other requesting authorities	2,062	(1,360)	19,109	(23,350)
Accident service	2,192	(1,932)	9,500	(10,116)
TOTAL ..	63,730	(59,421)	244,182	(250,940)

Average patients per day = 174.6 (162.4)

Average miles per patient = 3.8 (4.2)

Average patient carrying miles per day = 668.9 (685.6)

ANCILLARY AND CIVIL DEFENCE ANALYSIS

Analgesic apparatus	11,475	(11,116)
Immunisation team	14	(101)
Service and abortive	12,055	(5,401)
Civil Defence	22,340	(11,405)
TOTAL ..	45,180	(28,382)

WORK OF THE TUBERCULOSIS SERVICE

By the Consultant Chest Physician

The decline in the death rate from pulmonary tuberculosis, which has been the outstanding statistical feature over the past five years, has continued in line with the general trend in the country. It is noticeable that the total deaths from pulmonary tuberculosis during the year, 46, is less than half the figure for 1949, 98. The death rate from pulmonary tuberculosis, for the first time, fell below 20 per 100,000, that is, 18.7.

T A B L E I

DEATHS

		Death rate per 100,000 population	Non- Respiratory	Death rate per 100,000 population
	Respiratory			
1949 ..	98	45	9	4
1950 ..	87	36	8	3
1951 ..	60	24.6	6	2.5
1952 ..	51	21	11	4.5
1953 ..	46	18.7	6	2.4

So far, this decline has not been paralleled by a similar fall in the total number of new cases coming to light which, indeed, for the present year shows a rise.

T A B L E II

PRIMARY NOTIFICATIONS

		Respiratory	Non- Respiratory	Total
1949 ..		337	22	359
1950 ..		312	33	345
1951 ..		270	29	299
1952 ..		223	25	248
1953 ..		260	24	284

With the great increase of diagnostic facilities and propaganda, it is inevitable that a greater number of early cases are coming to light and weighting the comparable statistics, but the continued occurrence of advanced cases coming to diagnosis for the first time is such that the general situation cannot be viewed with complacency and calls for greater efforts on the preventive side.

With this in view, contact examination is being rigorously pursued and has been one useful method of case finding. The number of new contacts seen reflects this.

T A B L E III

	1949	1950	1951	1952	1953
New contacts examined ..	678	762	921	914	993
Number of contacts proved definite cases	8	11	5	15	33

The figure for 1953 approximates 3·5 contacts examined for each new case diagnosed.

B.C.G. vaccination is offered to all new uninfected contacts and, during the year, 235 vaccinations were carried out on contacts, a figure which again shows a marked increase on previous years.

The Mass Radiography Unit undertakes special Dockyard and Industrial surveys and has been responsible for finding some 25% of new cases coming to light during the year, although it is evident that the pick-up from routine re-checking of similar groups year after year is yielding a diminishing return and new fields, such as general practitioner referred cases, are more fruitful.

The number of new patients examined at the Clinic during the year has shown a further rise,

T A B L E IV

NEW PATIENTS EXAMINED

1949	1950	1951	1952	1953
1170	1251	1342	1490	1537

as has the total number of general attendances at the Clinic, although changes in methods of treatment have led to a general fall in attendances at refill clinics. The work at the Chest Clinic has, however, been somewhat lightened by the opening, in June 1953, under the auspices of the Regional Hospital Board and the Hospital Management Committee, of a new Chest Clinic attached to the Queen Alexandra Hospital. Here, it is now possible to oversee all cases living on the mainland of the City. This is a welcome addition, cutting down travelling time for patients and also taking a load off the Clinic, particularly the X-ray department, which is working to capacity.

DEATHS BY AGE GROUPS

AGE GROUP	RESPIRATORY		NON-RESPIRATORY		COMBINED		GR. TOTAL
	M.	F.	M.	F.	M.	F.	
0— 1	— (—)	— (—)	— (—)	— (—)	— (—)	— (—)	— (—)
1— 4	— (—)	2 (—)	— (—)	— (—)	— (—)	2 (—)	2 (—)
5—14	— (—)	— (—)	— (2)	— (1)	— (2)	— (1)	— (3)
15—24	1 (2)	1 (1)	1 (1)	— (—)	2 (3)	1 (1)	3 (4)
25—34	— (9)	1 (4)	1 (—)	— (1)	1 (9)	1 (5)	2 (14)
35—44	8 (1)	5 (1)	— (1)	1 (—)	8 (2)	6 (1)	14 (3)
45—54	5 (5)	3 (2)	1 (—)	— (—)	6 (5)	3 (2)	9 (7)
55—64	7 (12)	2 (2)	— (1)	— (1)	7 (13)	2 (3)	9 (16)
65 plus	9 (11)	2 (1)	1 (2)	1 (1)	10 (13)	3 (2)	13 (15)
TOTAL ..	30 (40)	16 (11)	4 (7)	2 (4)	34 (47)	18 (15)	52 (62)

(Figures in brackets are those for 1952)

Of the 46 deaths from respiratory tuberculosis, 9 cases (20%) were not notified during life.

NOTIFICATIONS BY AGE GROUPS

AGE GROUP	* NEW CASES						
	RESPIRATORY		NON-RESPIRATORY		COMBINED		GR. TOTAL
	M.	F.	M.	F.	M.	F.	
0— 1	1 (1)	— (—)	— (—)	— (—)	1 (1)	— (—)	1 (1)
1— 4	10 (4)	9 (2)	— (2)	— (—)	10 (6)	9 (2)	19 (8)
5—14	11 (6)	8 (12)	5 (5)	4 (6)	16 (11)	12 (18)	28 (29)
15—24	25 (33)	24 (25)	2 (4)	3 (1)	27 (37)	27 (26)	54 (63)
25—34	27 (25)	30 (19)	1 (2)	1 (1)	28 (27)	31 (20)	59 (47)
35—44	25 (19)	17 (9)	1 (—)	2 (—)	26 (19)	19 (9)	45 (28)
45—54	25 (20)	4 (4)	1 (—)	2 (1)	26 (20)	6 (5)	32 (25)
55—64	23 (19)	6 (6)	— (—)	1 (1)	23 (19)	7 (7)	30 (26)
65 plus	11 (16)	4 (3)	1 (1)	— (1)	12 (17)	4 (4)	16 (21)
TOTAL ..	158(143)	102 (80)	11 (14)	13 (11)	169(157)	115 (91)	284(248)

* Includes all primary notifications and new cases coming to the notice of the Medical Officer of Health by other means.

(Figures in brackets are those for 1952).

NUMBER OF CASES ON REGISTER 31st DECEMBER

	1948	1949	1950	1951	1952	1953
Respiratory	2,003	1,980	1,940	1,906	1,935	2,042
Non-Respiratory	209	221	217	203	188	186
TOTAL ..	2,212	2,201	2,157	2,109	2,123	2,228

SUMMARY OF CASES OF TUBERCULOSIS ON DISPENSARY REGISTER 1953

DIAGNOSIS	RESPIRATORY			NON-RESPIRATORY			TOTAL			GRAND TOTAL
	MEN	WM.	CH.	MEN	WM.	CH.	MEN	WM.	CH.	
A. (1) No. of definite cases of tuberculosis on Dispensary Register 1st January, 1953	1,055	796	84	62	67	59	1,117	863	143	2,123
(2) Transfers from Authorities outside Portsmouth	38	35	3	1	2	3	39	37	6	82
(3) Lost sight of cases returned during the year	-	-	-	-	-	-	-	-	-	-
B. No. of New Cases diagnosed as tuberculosis during the year :										
(1) CLASS A (T.B. minus)	57	33	30	6	9	9	63	42	39	144
(2) CLASS B (T.B. plus)	79	52	9	-	-	-	79	52	9	140
C. No. of cases included in A and B written off the Dispensary Register during the year as :										
(1) Recovered	22	11	4	3	1	1	25	12	5	42
(2) Dead (all causes)	38	16	2	3	1	-	41	17	2	60
(3) Removed to other areas	40	48	2	2	5	-	42	53	2	97
(4) For other reasons	18	27	1	7	5	4	25	32	5	62
D. No. of definite cases of tuberculosis on the Dispensary Register 31st December, 1953	1,116	819	107	65	69	52	1,181	888	159	2,228

ALMONER'S REPORT FOR THE YEAR 1953

An assistant almoner was appointed to the Chest Clinic in March, 1953, and the department now has two almoners and a part-time clerk. In September, structural alterations were made to the almoners' office, dividing it into two and thus making it possible to interview patients privately. This has proved a great boon as so much of the work is of a personal and confidential nature. The installation of an additional telephone has also made for much smoother running of the department. With the appointment of a second almoner, it is now possible to cover the clinics at Clive Road and Queen Alexandra Hospital, and, in addition, the almoners visit the tuberculosis wards in the Infectious Diseases and Saint Mary's Hospitals.

As the nature of an almoner's work becomes more widely known, the request for her services grows, and during the year 975 patients were helped in a variety of ways. Many of the problems which patients present are not easily solved, and entail home visits as well as several interviews at the clinic or hospitals. 384 home visits were paid during the year.

I should like to place on record once again the help which has been given to patients by the voluntary societies, and, in particular, the Portsmouth Voluntary Tuberculosis Care Committee. This committee, besides helping in many other directions, has sent patients for holidays and convalescent treatment, thus preventing those who are at work from breaking down, and helping others who have finished their hospital treatment towards complete recovery. Art therapy in the hospitals, organised by the Care Committee, in conjunction with the Regional Hospital Board, has continued to be most popular with the patients, and is of inestimable value in stimulating their imaginations and occupying their time. Patients make very good use of the Red Cross library which visits the hospitals several times each week, and there is a constant demand for books for out-patients in the library at the clinic. The Red Cross Circulating Picture Library is now supplying pictures to the tuberculosis wards in the Infectious Diseases and Saint Mary's Hospitals. These pictures, reproductions of the works of well-known artists, are a source of great pleasure and interest.

The Occupational Therapist visits those patients at home who are interested in handicrafts, as well as the patients in hospital.

In the Almoner's Report last year, the difficulty was mentioned of placing people fit for light work in suitable employment. It is very satisfactory now to record that the employment situation has improved, and, out of 106 patients referred to the Disablement Resettlement Officer during the year, only 12 are still waiting for suitable work. The fact that so many of our patients have been placed satisfactorily is due not only to the improvement in the labour situation, but also to the indefatigable efforts of the Disablement Resettlement Officer and his interest in the patients.

There are now 46 people working at Remploy, 23 men and 23 women, and it is understood that this number may soon be increased.

I should like to take this opportunity once again of thanking the staff of the official Social Service Departments and the voluntary organisations for their continued co-operation.

MASS RADIOGRAPHY

Report of the Medical Director

A.—GENERAL

AREAS SURVEYED

The Unit was away from its headquarters for fourteen weeks during the year, visiting seven differing areas including Gosport, Fareham, Lancing and Chichester. In two of these areas a visit to a mental hospital was arranged, in which some 2,300 patients and staff were X-rayed.

PUBLIC SESSIONS

Wherever possible an appointment system is used, with considerable success, thanks to the assistance given in Portsmouth by the W.V.S. and the Health Departments of other areas, to whom we are indebted for continued assistance. The impossibility of forecasting the response to general public sessions makes such a scheme well worth while when it is practicable. It also enables the staff of the Unit to work reasonable and forecastable hours.

TYPE OF WORK

As in previous years (this Unit has encouraged general practitioners to refer cases for many years) the proportion of cases referred by G.P's who were found to have active disease is higher than that of any other group, at over fifteen per thousand referred (fourteen in 1952). The figure for men in this group is the very high one of 24·6 per 1,000 (23 in 1952). Table IV gives details of all groups examined.

POLICY

In the Report for 1952 the importance of finding new groups and different individuals for X-ray, rather than 'continuing the round' of previously X-rayed factories, was stressed, and it is encouraging to know that this policy has official approval.

CO-OPERATION OF STAFF

I would like to take this opportunity of thanking the staff of the Unit for another year's hard work, willingly carried out. It is our reward that we X-rayed a greater number of individuals than previously and found an increased number of cases of active tuberculosis. This year is the first time since 1948 that the percentage of active tuberculosis found is greater than in the previous year.

I would also like to thank the Medical Officers of Health of the various areas for their assistance, and for that of their staffs. The work could not have been adequately carried out without the co-operation given.

I wish to thank the Chest Physicians in the various areas for dealing so sympathetically with the cases referred to them, and for the assistance which they have rendered.

B.—STATISTICAL

1.—ALL AREAS

The total number of examinations carried out is the highest yet recorded.

The total rate of incidence of active disease shows a rise for the first time since 1948, from 2·4 per 1,000 examined in 1952 to 2·9 per 1,000. The rate for men rose from 2·5 per 1,000 to 2·8, and that for women also

from 2·2 per 1,000 to 2·9. This rise is in part due to a rise in the figures for mental hospitals (Table IV – Group E).

2.—PORTSMOUTH

TUBERCULOSIS

A total of 34,092 individuals was X-rayed in the City in 1953 (26,552 in 1952). Of these 99 (83) were found to have active tuberculosis, giving a rate of 2·9 per 1,000 examined ; this is a further welcome fall from the 1952 figure of 3·1 per 1,000.

OTHER WORK

The great majority of the 2,414 cases referred from general practitioners were from Portsmouth, and the rate of active disease in these cases was 15·3 per 1,000 ; both sexes show a rise of approximately 1 per 1,000, compared with 1952.

Follow-up examinations have continued, a total of 1,147 such examinations being completed on cases first X-rayed in previous years. This resulted in thirteen cases of active disease being found.

A total of 531 new cases was recommended for follow-up examination at the Unit.

A total of 366 skin tests was carried out.

TOTAL NUMBERS EXAMINED BY MINIATURE FILM AND AGE GROUP DISTRIBUTION

TABLE I

AGE GROUP DISTRIBUTION														
	Under 15 years		15-24		25-34		35-44		45-59		Over 60		TOTAL	
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Male ..	2,091	4.54	6,235	13.54	5,640	12.25	5,073	11.01	6,052	13.14	1,516	3.29	26,607	57.77
Female ..	2,164	4.7	6,605	14.34	4,515	9.8	2,670	5.8	2,508	5.45	988	2.15	19,451	42.23
Total ..	4,255	9.24	12,840	27.88	10,155	22.05	7,743	16.81	8,560	18.59	2,504	5.44	46,058	100

Number recalled for large film examination = 1,751 (% of total examined 3.8)
Number recalled for clinical examination = 621 (% of total examined 1.13)

ANALYSIS BY AGE — CASES SHOWING EVIDENCE OF ACTIVE PULMONARY TUBERCULOSIS
(Rate per 1,000 in each group)

TABLE II

	Under 15 years		15-24		25-34		35-44		45-59		Over 60		TOTAL previous columns	
	No.	Rate per 1,000	No.	Rate per 1,000	No.	Rate per 1,000	No.	Rate per 1,000	No.	Rate per 1,000	No.	Rate per 1,000	No.	Rate per 1,000
Male ..	8	3.83	20	3.21	14	2.48	11	2.17	13	2.15	9	5.94	75	2.82
Female ..	4	1.85	21	3.18	18	3.98	8	3.0	4	1.59	2	2.02	57	2.93
Total ..	12	2.82	41	3.19	32	3.15	19	2.45	17	1.99	11	4.39	132	2.87

ANALYSIS OF ABNORMAL FINDINGS

TABLE III

	Male	Female	Total	Rate per 1,000
SECTION A :				
1. CASES OF INACTIVE PULMONARY TUBERCULOSIS				
(a) Primary lesions (21)	1,367	1,024	2,391	51·92
(b) Post-primary lesions (24)	453	271	724	15·72
2. NEWLY DISCOVERED CASES OF ACTIVE PULMONARY TUBERCULOSIS				
(a) Primary disease (20a & b)	12	8	20	0·4
(b) Unilateral post-primary disease (22a & b)	36	30	66	1·4
(c) Bilateral post-primary disease (23a & b)	24	17	41	0·9
(d) Pleural effusions	3	2	5	0·1
3. CASES RECOMMENDED FOR HOSPITAL OR SANATORIUM	43	35	78	—
4. CASES RECOMMENDED FOR OBSERVATION ..	128	113	241	—
SECTION B :				
NON-TUBERCULOUS CONDITIONS				
(a) Abnormalities of bony thorax and lungs (1) ..	609	485	1,094	—
(b) Bronchitis and Emphysema (2)	265	141	406	—
(c) Bronchiectasis (6)	66	50	116	—
(d) Pneumonia and Pneumonitis (3, 4, 5) ..	47	38	85	—
(e) Pneumoconiosis (8, 9)	8	—	8	—
(f) Pleural thickening and Fibrosis (7, 10, 11) ..	895	314	1,209	—
(g) Intra thoracic new growths (14)				
(i) Malignant	26	6	32	—
(ii) Non-malignant	—	—	—	—
(h) Cardiovascular lesions				
(i) Congenital (15)	5	3	8	—
(ii) Acquired (16)	191	260	451	—
(i) Miscellaneous	130	105	235	—

N.B.—Numbers in brackets refer to the Ministry of Health classification.

SURVEY ANALYSIS (ORGANISED GROUPS)

TABLE IV

TYPE OF SURVEY	NUMBER EXAMINED			NUMBERS SHOWING EVIDENCE OF ACTIVE PULMONARY TUBERCULOSIS						
	Male	Female	Total	Male		FEMALE		Combined Total	Combined Incidence per 1,000	
				No.	Incidence per 1,000	No.	Incidence per 1,000			
A	General Public	..	..	..	4	2.15	14	2.88	18	2.68
B	Industrial Groups	..	..	..	20	1.15	9	1.49	29	1.24
C	School Groups	..	..	..	4	1.34	4	1.44	8	1.39
D	General Practitioner Groups	..	..	..	24	24.67	13	9.02	37	15.33
E	Institutional Groups	..	..	..	12	12.05	3	2.8	15	7.25
F	National Service Recruits	..	..	..	2	1.34	—	—	2	1.34
G	Others includes : (a) Ante-Natals	..	..	..	9	9.36	14	4.32	23	5.47*
		..	..	..	—	—	4	2.2	4	2.2
		..	..	..	6	—	7	—	13	—
		—	—	—	—	—	—
	(c) Contacts	..	..	..	3	40.54	1	8.13	4	20.3
	(d) Out-Patients	..	..	..	—	—	2	3.61	2	3.61

*This figure is not statistically accurate, owing to the inclusion of re-checks from previous years.

PORTSMOUTH
CASES OF ACTIVE TUBERCULOSIS
TABLE V

	Under 15		15-24		25-34		35-44		45-59		Over 60		TOTAL	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Number Examined ..	1,557	1,673	5,130	5,404	4,064	3,706	3,438	2,007	3,943	1,739	987	444	19,119	14,973
No. of Active Cases ..	8	4	18	16	9	12	7	7	7	4	6	1	55	44
Rate per 1,000 Examined	5.1	2.4	3.5	3.0	2.2	3.2	2.0	3.5	1.8	2.3	6.1	2.3	2.9	2.9
Combined Rate ..	3.7		3.2		2.7		2.6		1.9		4.9		2.9	

MENTAL HEALTH SERVICE

By the Executive Officer

1.—Administration

(A) *Committee*

The prevention, care and after-care of mental illness and mental defectiveness are undertaken by the Mental Health Service, which is administered by the Mental Health Sub-Committee of the Health Services Committee.

(B) *Staff*

Under the direction of the Medical Officer of Health the work of the Service is performed by the following staff:—

One medical officer employed part-time on the supervision of mental defectives in their own homes.

Executive Officer — lay administrator, petitioning officer, with duly authorised officer powers.

Senior psychiatric social worker — has petitioning officer and duly authorised officer powers.

Six mental health social workers — three men and three women, of whom the former have duly authorised officer powers. One has, in addition, petitioning officer powers. Of the three men, two were for many years relieving officers and the third a charge nurse in a mental hospital; and of the three women, two possess social science diplomas, and the third, though without academic qualification, has had many years experience in social work.

OCCUPATION CENTRE STAFF

Supervisor.

Handicraft Instructor.

Five Assistants.

Handicraft Instructress (who is also home teacher).

(C) *Co-ordination with Regional Hospital Boards and Hospital Management Committees*

There is still user of the local health authority's staff by Saint Mary's Hospital in the supervision of mental defectives on licence from that hospital. This has slightly decreased in extent owing to the transfer of trainable high-grade mental defectives from Saint Mary's Hospital to training hospitals, in particular St. Lawrence's Hospital, Caterham.

The advisory service of the psychiatrists of St. James' Hospital continues to be available to the local health authority through the normal consultant channels.

(D) *Duties delegated to Voluntary Associations*

No duties are (or were) delegated to any voluntary association.

(E) *Training*

The staff of the Service is unchanged since the last report, and all members are trained social workers. No university or similar students have been taken for training during the year.

2.—Account of Work undertaken in the Community

(A) *Under Section 28, National Health Service Act, 1946*

The Service continued to maintain a close liaison with the various regional and local departments of the National Health Service and with the Ministry of Labour, Ministry of Pensions, and all other social agencies in the City, in the provision of community care for the prevention of mental illness, and the care and after-care of mental patients and mental defectives.

A particularly useful liaison exists between the School Medical Service and the Mental Health Service with a view to any school child tested by the Educational Psychologist and considered to be in need of it receiving community care.

(B) *Under the Lunacy and Mental Treatment Acts, 1890-1930*

515 (457) persons were referred as cases of alleged mental illness. Of those cases dealt with under the Lunacy Act, 1890, 141 were admitted to designated wards under Section 20. 39 were admitted thereto by Orders of Justices under Section 21; 41 were admitted to mental hospitals under Section 16, and 15 to mental hospitals by Urgency Orders under Section 11. Of those dealt with under the Mental Treatment Act, 1930, 84 became voluntary patients under Section 1, and 39 were admitted to mental hospitals as temporary patients under Section 5. Because of the lack of more appropriate accommodation, 13 cases were admitted to geriatric wards. In 143 cases the Justices to whom notice was given considered no action was required. The extreme shortage of hospital observation beds designated for the purposes of Section 20 and 21 of the Lunacy Act, 1890, is still attended by the undesirable risk of recourse to admission to mental hospitals by reception and temporary treatment orders.

(c) *Under the Mental Deficiency Acts, 1913-1938*

(i) ARRANGEMENTS FOR ASCERTAINING AND SUPERVISING MENTAL DEFECTIVES

The liaison with other departments and agencies mentioned above has been developed to the extent that the powers and duties of the local health authority concerning mental defectives are widely known. In the process of ascertainment, where diagnostic confirmation is required, this is available through the consultant services of the psychiatric staff of St. James' Hospital, and supervision is carried out by the foregoing staff of social workers.

At the end of 1953 there were 201 mental defectives under statutory supervision, and a further 410 under "voluntary supervision", not being "subject to be dealt with".

(ii) GUARDIANSHIP

Mental defectives under guardianship (of whom there were 92 at the end of the year) are similarly supervised, the frequency of visitation being determined by the nature of the case. Medical supervision under Article 76 (1) of the Mental Deficiency Regulations, 1948, is carried out by a part-time medical officer of the Council. Of the number given, 9 cases were, at the end of the year, placed with nominees of the Guardianship Society. Of both these and local cases, the majority of those needing pecuniary assistance are now maintained by the National Assistance Board.

Mental defectives on licence locally from Saint Mary's Hospital and other mental deficiency hospitals are supervised by the Mental Health Service by arrangement with the various hospital management committees.

(iii) ARRANGEMENTS FOR PROVIDING OCCUPATION AND TRAINING FOR DEFECTIVES

An Occupation Centre for mental defectives is in operation, having 65 patients of both sexes on the register at the end of 1953, chiefly of low-grade feeble-minded and imbecile grade, divided into primary mixed and intermediate mixed classes, and a senior male class. Instruction is given in sense training, elementary handicrafts, reading and writing and physical training. A senior female class of 22 meets on three afternoons and one morning weekly, under the handicraft instructress, who also gives some home teaching to suitable cases.

INFECTIOUS DISEASES HOSPITAL
By the Physician Superintendent

ADMISSIONS

The total number of admissions was higher than in 1952.
During the year 1,458 fever, (in 1952 – 1,249) 74 geriatric, (in 1952 – 176) and 298 tuberculosis cases (in 1952 – 294) were admitted, making a grand total of all cases admitted 1,830 (in 1952 – 1,719).
Of the fever cases, 421 (in 1952 – 328) cases were admitted from outside of the City boundary, and 12 (in 1952 – 25) were Service cases.

DISCHARGES AND DEATHS

Discharges – 1,437. Deaths – 28. TOTAL 1,465.
Of this number, 420 discharges and 9 deaths were outside of the City boundary, making a total of Portsmouth cases – 1,036.

CASES DISCHARGED DURING 1953

Month	Scarlet Fever	Diph- theria	Other Infections	Non- Infections	Deaths	TOTAL
January ..	18	–	109	24	4	155
February ..	19	–	88	25	3	135
March	20	–	93	37	4	154
April	29	–	69	23	1	122
May	19	–	76	42	3	140
June	18	–	59	26	1	104
July	56	–	72	16	2	146
August ..	25	–	56	29	3	113
September ..	14	–	72	24	1	111
October ..	21	–	59	21	–	101
November ..	17	–	46	9	3	75
December ..	22	–	69	15	3	109
TOTAL ..	278	–	868	291	28	1,465
Outside Cases ..	51	–	252	117	9	429
Portsmouth Cases ..	227	–	616	174	19	1,036

DEATHS – 1953

During the year there were 19 deaths from the causes stated below :

T.B. Meningitis & Pulmonary T.B.	1	Meningococcal Septicaemia with	
Miliary T.B. & Bilateral Collapse of		Adrenal Collapse. (Haemorrhage)	1
Lung	1	Gastro Enteritis	1
Toxaemia, Lobar Pneumonia, Mon-		Pertussis, Broncho-Pneumonia with	
golism with Congenital Heart	1	Atelectasis & Gastro Enteritis . .	1
Broncho-Pneumonia, Pneumococcal		Hydrocephalus & Portal Obstruction	1
Meningitis & Gastro Enteritis	1	Pertussis & Cerebral Oedema	1
Pertussis & Gastro Enteritis	1	Meningo-Encephalitis	1
Broncho-Pneumonia & Hypertensive		Peripheral Vascular Failure due to	
Heart Disease	1	Acute Haemorrhagic Measles	1
Broncho-Pneumonia	1	Broncho-Pneumonia & Congenital	
Congenital Absence of Bile Ducts &		Megacolon	1
Terminal Broncho-Pneumonia	1	Poliomyelitis (Paralytic) & Acute	
Tuberculous Broncho-Pneumonia	1	Peripheral Vascular Failure	1
Polio-Encephalitis	1		

Diphtheria

There were no cases admitted as diphtheria, and no cases proved to be this disease.

Scarlet Fever

There were 233 cases admitted as scarlet fever.

Enteric Fever

There were four cases admitted as suspected typhoid fever and three cases proved to be para-typhoid.

Puerperal Pyrexia

There were 45 cases admitted as puerperal pyrexia and 45 cases proved to be that disease.

Poliomyelitis

During the year there were 37 cases admitted as poliomyelitis. Thirteen proved to be poliomyelitis. These can be sub-divided into 11 paralytic and 2 non-paralytic.

		Scarlet Fever	Diphtheria	Typhoid and Paratyphoid Fever	Meningococcal Infect'n	Acute Polio-myelitis		Erysipelas	Dysentery	Measles	Whooping Cough	Ophthalmia Neonat'um	Puerperal Pyrexia	Notifiable Pneumonia	Food Poisoning	Acute Encephalitis - Infective	Malaria	Tuberculosis		TOTAL
						Paralytic	Non-paralytic											Pulmonary	Other Forms	
Jan.	3	1	-	-	-	-	-	-	-	234	2	-	-	-	-	-	-	1	-	238
"	10	9	-	-	-	-	-	-	-	467	1	-	5	1	-	-	-	3	-	486
"	17	4	-	-	-	-	-	1	-	372	6	-	1	1	-	-	-	15	-	400
"	24	2	-	-	-	-	-	3	1	248	10	-	-	1	1	-	-	12	-	279
"	31	9	-	-	-	-	-	1	-	285	4	1	-	4	1	-	-	6	-	311
Feb.	7	7	-	-	-	-	-	1	2	268	3	-	-	19	3	-	-	2	-	305
"	14	4	-	-	2	-	-	1	-	266	12	-	-	10	-	-	-	3	1	299
"	21	1	-	-	1	-	-	-	-	174	10	-	1	5	-	-	-	5	2	199
"	28	4	1	-	1	-	-	1	-	121	3	-	1	-	-	-	-	9	1	142
Mar.	7	7	-	-	-	-	-	1	-	142	6	-	2	4	1	-	-	9	-	172
"	14	9	-	-	-	-	-	-	-	81	1	-	3	-	-	-	-	2	1	97
"	21	6	-	-	-	-	-	-	-	54	7	-	5	1	-	-	-	5	-	78
"	28	7	-	-	-	-	-	-	-	39	2	-	1	2	-	-	-	6	-	57
April	4	6	-	-	-	-	-	-	1	42	2	1	1	-	-	-	-	6	-	59
"	11	10	-	-	-	-	-	-	-	29	8	-	4	3	-	-	-	4	-	58
"	18	7	-	-	-	-	-	-	2	15	1	-	2	-	-	-	-	9	-	36
"	25	6	-	-	-	-	-	-	1	20	4	-	5	1	-	-	-	2	-	39
May	2	4	-	-	-	-	-	-	1	7	3	-	4	1	-	-	-	11	-	31
"	9	7	-	-	-	-	-	-	2	5	6	-	4	-	-	-	-	6	1	31
"	16	5	-	-	-	1	-	1	-	6	8	-	3	-	-	-	-	2	2	28
"	23	5	-	-	1	2	-	-	-	4	7	-	7	1	-	-	-	4	-	31
"	30	5	-	-	-	-	-	-	1	3	3	-	1	-	-	-	-	6	1	20
June	6	5	-	-	-	-	-	1	-	8	9	-	-	2	-	-	-	-	1	26
"	13	7	-	-	-	-	-	-	-	-	5	1	-	-	-	-	1	3	-	17
"	20	10	-	-	1	-	-	-	1	6	8	-	3	-	-	-	-	4	-	33
"	27	18	-	-	-	-	-	1	-	3	7	-	1	-	-	-	-	5	3	38
July	4	13	-	-	-	1	-	-	-	4	19	-	2	-	-	-	-	2	-	41
"	11	16	-	-	-	-	-	-	-	1	12	-	2	1	-	-	-	7	2	41
"	18	15	-	-	-	2	1	-	-	2	7	-	2	1	-	-	-	4	-	34
"	25	14	-	-	-	-	-	-	-	1	12	1	3	-	-	-	-	5	1	37
August	1	10	-	1	-	-	-	-	-	2	14	-	2	-	-	-	-	3	1	33
"	8	1	-	-	-	1	1	-	-	-	26	-	2	-	1	-	-	8	-	40
"	15	8	-	-	-	-	-	1	-	-	15	-	1	2	-	-	-	2	-	29
"	22	3	-	2	-	-	-	-	-	1	15	-	-	-	-	-	-	2	2	25
"	29	1	-	-	-	-	-	1	1	-	21	-	-	-	-	-	-	5	-	29
Sept.	5	2	-	-	-	-	-	-	-	-	28	-	2	-	-	-	-	2	-	34
"	12	3	-	-	-	-	-	-	-	2	37	-	2	-	1	-	-	-	-	45
"	19	3	-	-	-	-	1	1	-	-	22	-	-	-	2	-	-	10	-	39
"	26	4	-	-	-	1	-	1	-	1	11	-	1	-	1	-	-	3	-	23
Oct.	3	6	-	1	-	-	-	-	-	1	14	-	3	2	2	-	-	5	-	34
"	10	6	-	-	1	-	-	2	-	-	19	-	-	-	-	-	-	6	-	34
"	17	6	-	-	-	-	-	4	-	1	6	-	1	-	-	-	-	4	-	22
"	24	5	-	-	-	-	-	-	-	-	15	-	1	2	1	-	-	4	1	29
"	31	9	-	-	-	1	-	1	-	-	9	-	-	-	1	-	-	3	1	25
Nov.	7	3	-	-	-	-	-	-	-	-	12	-	-	1	1	-	-	8	-	25
"	14	10	-	-	-	1	-	-	-	-	22	-	1	-	8	-	-	3	-	45
"	21	9	-	-	-	-	-	1	-	1	19	-	-	-	1	-	-	5	-	37
"	28	9	-	-	1	-	-	1	-	-	14	-	1	1	2	-	-	5	-	34
Dec.	5	7	-	-	-	-	-	1	-	-	17	-	2	-	-	-	-	4	-	31
"	12	2	-	-	-	-	-	1	-	1	21	-	-	-	-	-	-	6	-	31
"	19	3	-	-	-	-	-	-	1	2	27	-	-	-	1	-	-	5	-	39
"	26	8	-	-	-	-	-	-	-	1	62	-	3	2	-	1	-	9	1	87
Total Cases 1953		341	1	4	8	10	3	27	14	2920	634	4	85	68	28	1	1	260	24	4433
1952		237	-	5	11	4	7	42	132	2618	181	14	99	45	18	-	-	312	29	3754
Deaths 1953		-	-	-	3	3		-	-	1	3	-	-	*	-	-	-	46	6	218
1952		-	-	-	3	1	-	-	-	-	1	-	-	110	-	-	-	51	11	177

*All forms

	0—1	1—4	5—14	15—24	25—44	45—64	65—74	75 & over	TOTAL	
	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	F.
Malignant neoplasm—stomach ..	- -	- -	- -	- -	1 (-) - (-)	17 (23) 5 (5)	13 (13) 5 (13)	9 (18) 10 (15)	40 (54)	20 (33)
Malignant neoplasm—lung, bronchus	- -	- -	- -	- -	2 (4) 1 (1)	40 (34) 7 (3)	20 (20) 5 (2)	8 (3) 5 (4)	70 (61)	18 (10)
Malignant neoplasm—breast ..	- -	- -	- -	- -	- (-) 6 (4)	1 (1) 15 (19)	- (-) 14 (9)	- (-) 7 (11)	1 (1)	42 (43)
Malignant neoplasm—uterus ..	- -	- -	- -	- (-) 1 (-)	- (-) 4 (2)	- (-) 17 (9)	- (-) 4 (9)	- (-) 5 (2)	- (-)	31 (22)
Other malignant and lymphatic neoplasms	- -	- (1) 1 (-)	- (1) 1 (1)	2 (1) - (1)	8 (3) 2 (4)	51 (37) 37 (29)	45 (44) 33 (39)	34 (43) 35 (35)	140 (130)	109 (109)
Leukaemia, aleukaemia ..	- -	- (1) - (-)	- (-) 2 (-)	- (-) 1 (-)	1 (2) - (-)	1 (2) 1 (-)	2 (1) 3 (1)	- (-) 1 (2)	4 (6)	8 (3)
TOTALS ..	- -	- 1	- 3	2 2	12 13	110 82	80 64	51 63	255	228
	(-) (-)	(2) (-)	(1) (1)	(1) (1)	(9) (11)	(97) (65)	(78) (73)	(64) (69)	(252)	(220)
GRAND TOTAL ..									483 (472)	

VENEREAL DISEASES TREATMENT CENTRE

By the Venereal Diseases Officer

The figures for infective syphilis are still low, namely, 7 cases for the year, all of which have been acquired from sources outside the area covered by this Clinic. Gonorrhoea figures are virtually stationary, while figures for the country as a whole show a slight but definite increase. This, I think, illustrates the value of the Almoner's work, in close co-operation with the Naval Authorities, in tracing contacts and bringing them under treatment before the disease can spread.

TABLE OF STATISTICS

	1953			1952		
	M.	F.	Total	M.	F.	Total
No. of patients under treatment or observation on 1st January	140	130	270	103	142	245
No. of patients dealt with for the first time during the year	414	181	595	369	175	544
No. of patients discharged on completion of treatment and final tests of cure, etc.	332	125	457	302	128	430
No. of patients who ceased to attend before completion of treatment	1	3	4	5	9	14
No. of patients who defaulted before final discharge	17	12	29	17	49	66
No. of patients transferred to other centres or to the care of private practitioners ..	68	26	94	46	15	61
No. of patients remaining under treatment or observation on 31st December ..	172	170	342	140	130	270
No. of attendances—						
(a) for attention by the physician ..	3,055	2,423	5,478	2,763	1,968	4,731
(b) for intermediate treatment ..	1,050	1,114	2,164	733	842	1,575
TOTAL ATTENDANCES ..	4,105	3,537	7,642	3,496	2,810	6,306

DETAILS OF WORK OF THE ALMONER

	1953	1952
Number of patients helped by Almoner	119	104
Number of visits paid by the Almoner	74	96
" " " Sister Trimble	18	37
Letters—Reports sent	125	163
Reports received	73	37
Number of interviews	226	144
Number of attendances	3,537	2,810

PARASITIC INFESTATION

By the Medical Officer in Charge, Disinfestation Clinic

Scabies

The number of cases of scabies seen during 1953 still remained high—169 cases and contacts, compared with 209 in 1952 and 112 in 1951.

The total number of cases dealt with during the year :—

					1953	1952
Cases	..	..	..	..	87	109
Contacts	..	..	..	..	82	100
TOTALS					169	209

There were no cases of added skin infection.

A 25% emulsion of Benzyl Benzoate, which is made up at the clinic, is still being used for the treatment of scabies.

Distribution as to age and sex was :—

	Under 5			5—15			Over 15			Totals		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
Cases ..	13	5	18	18	19	37	7	25	32	38	49	87
Contacts ..	3	6	9	14	16	30	20	23	43	37	45	82
Totals ..	16	11	27	32	35	67	27	48	75	75	94	169
Sent by Private Doctors	5	4	9	7	5	12	3	18	21	15	27	42

Total attendances for the year—Original ..	169
Subsequent	175
	<hr/>
GRAND TOTAL ..	344
	<hr/>

No letters warning of possible legal proceedings for non-attendance at the clinic were required.

The following table gives figures for the previous 7 years.

				CASES	CONTACTS
1947	..	..	..	656	521
1948	..	..	..	357	243
1949	..	..	..	160	127
1950	..	..	..	64	76
1951	..	..	..	47	65
1952	..	..	..	109	100
1953	..	..	..	87	82

The incidence of scabies undoubtedly varies greatly from time to time and the condition associated with periods of war are mainly blamed for increases in the incidence ; but one is unable to hazard a guess as to the reason for the increase in the numbers seen during the past two years.

Pediculosis

It is gratifying to record a decrease in the number of persons seen and treated.

During the year 141 households, comprising 175 families and 675 individuals, were seen and treated ; of these 479 were actually infested.

The distribution as to age and sex was :—

	Under 5			5—15			Over 15			Totals		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
Infested ..	23	20	43	118	191	309	17	110	127	158	321	479
Not Infested	18	25	43	15	21	36	58	59	117	91	105	196
Totals ..	41	45	86	133	212	345	75	169	244	249	426	675
Sent by Private Doctors	5	3	8	7	3	10	10	12	22	22	18	40

ATTENDANCES

	Under 5			5—15			Over 15			Totals		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
Original ..	41	45	86	133	212	345	75	169	244	249	426	675
Subsequent..	65	55	120	254	435	689	91	431	522	410	921	1331
Totals ..	106	100	206	387	647	1034	166	600	766	659	1347	2006

65% of the persons infested were school children in the age group 5—15. This, of course, is the age group most frequently inspected and cases in the other groups are brought to notice through the school children found infested.

Most of the cases were sent by the School Health Service, but 40 were referred by private doctors. 61 families had been treated previously for pediculosis — most for the first time, but one family had attended 10 times since 1944, and one 6 times since 1948. Pubic infestation was found in 4 persons ; only one case of infestation with body lice came to notice.

Letters giving warning of the possibility of prosecution under Section 85 of the Public Health Act, 1936, were sent to 21 individuals. All had the desired effect. Six families were brought by ambulance or car because of infirmity, and domiciliary treatment was undertaken in five cases.

It will be noted from the figures that, of all persons seen, approximately 70% were infested with either lice or nits — mostly with nits. In many the infestation was moderate, but occasionally heavy nit infestation was seen. In one case of an elderly woman aged 78 living alone, the hair through neglect had become matted into a solid mass and underneath was heavily infested with nits and lice. Problem families, broken families and large families continue to figure amongst those attending the disinfection clinic.

The following table gives comparative figures of infested persons treated at the clinic from 1947 onwards :—

1947	..	..	..	..	640
1948	..	..	..	..	573
1949	..	..	..	..	826
1950	..	..	..	..	916
1951	..	..	..	..	733
1952	..	..	..	..	850
1953	..	..	..	..	479

SEASONAL INCIDENCE

March, September and October were the months during which most cases were seen. This, however, is most likely due, in the case of the two latter months, to the schools re-opening and the school nurses re-starting inspections. It is I think generally agreed that there is no evidence as yet of a seasonal incidence of pediculosis.

Clinic arrangements and mode of treatment continued as in previous years. All families are seen by appointment between 8.30 a.m. and 12 noon from Mondays to Fridays, and workers by appointment on Saturday mornings. Suleo – a D.D.T. proprietary emulsion – is still in use. A remedy, however, to facilitate the removal of nits still remains to be found.

Flea Infestation

Nine families were referred to the clinic for flea infestation, four of them in October. These figures are included under the heading of pediculosis.

REPORT OF THE BATHS SUPERINTENDENT

The rather good weather experienced in 1953, together with the full co-operation and assistance given by the staff and the teachers of the Portsmouth schools, and also the innovations I have introduced, has I am pleased to state made this year the greatest in the history of the Park Road Baths with regard to patronage and revenue.

The total patronage for the year under review (1953-54) was 119,936 – an increase of 22,196 over the previous year.

The financial return for the above patronage amounted to £4,730 10s. 2d. – an increase of £834 12s. 6d.

SWIMMING BATH SECTION

The largest increase came from this section of the Bath services. The school children attending in classes under the local education authority's own instructor showed the large increase of 8,469 and all persons concerned are to be commended in extending this very beneficial exercise to the school children.

The school children attending after school hours in charge of a teacher at reduced rate of 2d. per child showed the good increase of 894 male and 428 female, making a total of 1,322.

I am pleased to state that all the other sections of the swimming bath service, except one, showed increases. The adult male increase was 1,676, but adult female showed a decrease of 73 persons; male juniors (under 15) showed the good increase of 6,206 and female juniors an increase of 3,127, giving a total in the two latter divisions of 9,333. The net result of all these is an increase of 20,727 over last year.

Spectators showed an increase of 161 persons – small but still more than 1952-53.

Tuition to pupils – a slight decrease of 12. This can be understood as, with the bath being busy, pupils are reluctant to take instruction, as they are somewhat harassed by other bathers.

Private hire of the swimming bath exceeded 1952-53 to the extent of $177\frac{3}{4}$ hours – $150\frac{3}{4}$ hours at 15/- and 27 at 7s. 6d. The great enthusiasm displayed by the Under-Water Clubs for the new art of under-water swimming can explain some of the former increase, whilst the latter can be explained by the private period allocated by the Committee to the Infantile Paralysis League on Sunday mornings for the exclusive use of their members.

Season Tickets. Instituted mid-way through the season, four of these have been issued – one adult and three junior. I anticipate the public will partake of them in greater measure as the privilege becomes known.

Hair-dryers. These have certainly been a great success, no fewer than 6,288 patrons having used the machines since August, 1953. This figure should be greatly increased in the forthcoming full year.

Brylcreem. Users of this service numbered 11,376 persons.

The self-weighing machine, installed in the late summer, has also proved a great success and another source of revenue, 1,455 persons having used it. Practically almost one person in every hundred who enters the establishment uses the machine.

Plant and machinery used in connection with the filtration and chlorination of the swimming bath water continues to give great satisfaction,

especially in treating the water in the new "Breakpoint" method of chlorination, which gives greater protection than the "Marginal" or "Chloramine" systems.

The results of the tests of the numerous samples of water taken by the Health Department for bacteriological examinations and counts can testify to the highly satisfactory condition of the water, whilst the patrons themselves can testify to the high degree of clarity and attractiveness.

The re-decoration of the swimming bath hall and cubicles has enhanced the swimming area tremendously and the patrons have been most appreciative of the work done.

PRIVATE HOT BATHS

The modernising of the male section of this service, which was first proposed some five years ago, has not yet been sanctioned and I consider the decorative condition will have an ultimate detrimental effect upon the patronage; nevertheless, there has been a considerable increase in three divisions and a decrease in three others, the result being an overall total increase in baths taken. The different sections showed that 1/- male had 18,695 baths – an increase of 1,517, whilst the 1/- female had 2,071 – an decrease of 487. 9d. male baths, with 6,286 attendances, had a decrease of 83; this is the only instance of any decrease in any of the male services in the whole of the establishment. The 9d. female baths showed 969 persons – a slight decline of 57. In the lowest price bath the situation is different; here we have two increases – the 6d. male with 5,397 baths – a 298 increase, and the 6d. female with a total of 3,335 – the pleasing increase of 120. Grand totals for this section show 36,753 "Private Bath" patrons – an increase of 1,308 persons.

Luma baths have not met with the success anticipated, only 51 persons having partaken of the remedial treatment. The detracting feature of this service seems to be the amount of time necessary for the cooling down of the person before returning home. There has been no financial loss, however, in the incorporation of this service and those persons who have partaken of the treatment have testified to the physical benefits felt.

Though the tendency for private bath patronage throughout the country, with the building of modern houses, is towards a decline, I am pleased to state this trend is not borne out locally by these statistical returns but a national survey would probably point to a lessening of demand.

STAFF

The staff continued in their efforts to give patrons the best of services and conditions that the establishment could offer and I consider they were successful in their endeavour.

The following tables give details of the attendances and receipts during the year:—

	PRIVATE BATHS						SWIMMING BATH						TOTAL	
	MALE			FEMALE			MALE			FEMALE			Male	Female
	1/-	9d.	6d.	1/-	9d.	6d.	1/-	6d.	2d.	1/-	6d.	2d.		
	18,695	6,286	5,397	2,071	969	3,335	8,918	21,749	3,392	1,655	9,096	2,022	64,437	19,148
1953-54	17,178	6,369	5,099	2,558	1,026	3,215	7,242	15,543	2,498	1,728	5,969	1,594	53,929	16,090
Increase	1,517	—	298	—	—	120	1,676	6,206	894	—	3,127	428	10,508	3,058
Decrease	—	83	—	487	57	—	—	—	—	73	—	—	—	—

	Classes	Spectators	Grand Total	Hire of Bath	Tuition Fees	£	s.	d.
1953-54	..	969	119,936	650½ hours	1,084 at 2/-	4,730	10	2
1952-53	..	808	97,740	473 "	1,096 "	3,895	17	8
Increase	..	161	22,196	177¾ "	—	834	12	6
Decrease	..	—	—	—	12	—	—	—

REPORT OF THE VETERINARY OFFICER

MEAT INSPECTION

Throughout the year the country was never completely free for any lengthy period of time from the notifiable diseases anthrax, foot and mouth disease, fowl pest, and swine fever. Although the incidence of swine fever was exceptionally high and was very troublesome for those responsible for its control work, it did not disturb the operations at the Portsmouth Meat Depot. Unlike swine fever, movement restrictions imposed by the Ministry of Agriculture on susceptible species of animals following confirmation of outbreaks of foot and mouth disease are most likely to upset the normal working of the local Wholesale Meat Depot, which despatched supplies to the following localities :—Fareham, Gosport, Lee-on-Solent, Warsash, Droxford, Petersfield, Liss, Liphook, Havant, Waterlooville, Hayling Island and Emsworth. It is true that the relatively smooth distribution of meat supplies after allocation by the Retailer's Buying Committee to the traders served from Greetham Street was due largely to the favourable figures associated with foot and mouth disease, compared with the epidemic of last year. This is understandable when one remembers that, with the exception of the horse, all the common food animals are susceptible to this disease. So far as my other duties allowed, regular visits were made to the Wholesale Meat Depot. The total numbers of visits to meat premises, Greetham Street, during the year was 338. Home-killed consignments came from Fontley, Petersfield, Eastleigh, Dorchester, Ipswich, Horsham, and Brighton, and consisted of beef, veal, mutton, lamb and pork. Careful attention was given to beef offal on arrival. On a number of occasions the Retailer's Buying Committee refused to accept meat despatched to the Meat Depot, owing to its condition. The W.M.S.A. then asked for my opinion, and, after careful inspection to save as much as possible for human consumption, some serious decisions had to be taken. Although on the whole English carcass beef was satisfactory on arrival, English pork was sometimes troublesome. Although less frequently detected than in imported, on a number of occasions it was necessary to condemn as unfit for human consumption good quality English beef affected with bone taint. Regularly throughout the year some imported beef had to be condemned for the same reason. Details of condemnation are given below.

MEAT CONDEMNATIONS

English :	772 lbs. forequarter beef ; 753 lbs. hindquarter beef ; 3,489 lbs. pork ; 113 lbs. pigs heads ; 3,338 lbs. part ox liver ; 825 lbs. ox liver ; 45 lbs. ox brains ; 1,739 lbs. ox heads ; 50 lbs. ox skirts ; 49 lbs. ox tails ; 120 lbs. ox hearts ; 16 lbs. ox tongues ; 339 lbs. ox lungs ; 123 lbs. lites and melts ; 15 lbs. melts ; 104 lbs. mutton ; 6 lbs. sheeps heads ; 8 lbs. sheeps plucks ; 185 lbs. lamb breads ; 479 lbs. udder ; 162 lbs. calves feet ; 41 lbs. pork fat ; 13 lbs. lamb ; 14 lbs. pigs pluck.
Imported :	29 lbs. forequarter beef ; 1,227 lbs. hindquarter beef ; 327 lbs. pork ; 66 lbs. lamb ; 24 lbs. calves kidneys ; 20 lbs. poultry ; 7 lbs. mutton ; 40 lbs. beef ; 62 lbs. sheep liver.

PUBLIC HEALTH (MEAT) REGULATIONS

Throughout the year all home-killed meat and offal sent into the City

was transported to the Wholesale Meat Depot, Greetham Street, by road vehicles. Meat Transport Organisation Ltd. was again responsible for the transportation of meat. Both the local manager and his deputy who have had a very extensive experience in the trade supervised daily the work of transport. No doubt the staff's careful handling and precautionary measures against the exposure of the meat to any form of contamination contributed very substantially to the smooth and satisfactory manner in which this task was carried out. Offal was again conveyed in metallic containers which for a short time caused a minor problem by, occasionally, some evidence of contamination being observed. On investigation it was found that the contamination was caused in transit by the bottom of the upper container touching the offal in the container below. Obviously the solution was to put less offal in each container, which promptly rectified the trouble. Very little criticism of transport was heard during the year which was due no doubt to the fact that usually carcass beef was in a satisfactory condition on arrival. On the whole there was ample evidence that the general provisions of the Regulations were well observed.

ANTHRAX

The year opened favourably by a substantial decrease in the monthly total for January following the recording of the first fall for several months in the monthly total for December 1952. Despite the fall 126 outbreaks were detected, a fact which no doubt caused the authorities considerable anxiety. One evening a report reached me that anthrax was suspected by a V.S. in a dead pig at a local institution. Later the same evening I visited the piggery and learned that anthrax was suspected in a large sow found dead. At this phase and without waiting for the finding of the Ministry of Agriculture's laboratory staff it is the responsibility of the Local Authority to destroy forthwith the suspected animal. After digging a pit this was carried out expeditiously by burning. Obviously the Ministry of Agriculture experienced some difficulty in reaching a reliable verdict and gave warning of a few days delay in making a decision. Finally, the finding was negative. At the end of the year's first quarter the number of outbreaks confirmed was 294, compared with a total of 119 at the same date last year. A steady improvement in the position was maintained to the end of the first half of the year when the comparable figures were 434 this year against 274 for the corresponding period in 1952. Satisfactory monthly figures were maintained from the spring to the end of September, when the comparable aggregates were 505 this year and 657 last year. During the second half of last year some exceptionally high monthly totals were recorded. Despite some slight increases in monthly figures in the latter half of this year, there is no doubt that the Ministry of Agriculture will regard the year as a relatively satisfactory one. The annual figures of this disease issued by the Ministry of Agriculture show a decrease of 50%, the approximate yearly totals being 600 this year and 1,200 in 1952.

FOOT AND MOUTH DISEASE

The Ministry of Agriculture's figures issued in April revealed a substantial improvement in the position relating to foot and mouth disease, compared with the previous year. At the end of the first quarter of the year 22 outbreaks were detected against 56 at the same date in 1952. Following this country's complete freedom from the disease throughout the month of May, striking comparable totals were published for the first half of the year. 408 outbreaks were recorded at the end of June, 1952, compared with 26 at the corresponding date this year. A very satisfactory state of affairs existed

throughout the 3rd quarter of the year, when during the months of July and September, no outbreak was confirmed in Great Britain. During the period of 3 months only two outbreaks were discovered – both in August. If one remembered the serious epidemic of this disease in 1952, one would not expect any similarity in the comparable annual figures for 1952 and 1953. Details given in the Ministry of Agriculture's annual returns show a striking improvement compared with those of 1952. Forty outbreaks involving 7,750 animals were detected during 1953, compared with a total of 495 involving over 75,000 animals in 1952. The comparative figures appear to justify those responsible for its control in regarding the year as a relatively satisfactory one.

SWINE FEVER

Following the issue by the Ministry of Agriculture of favourable returns for the opening month of the year, the position steadily deteriorated and an increase of 100% was recorded for the number of outbreaks detected during the year's first quarter. The comparable figures at the end of March were 563 against 275 at the corresponding date in 1952. Other than a drop to about 260 outbreaks during June, compared with between 400 and 500 monthly totals for April and May, it was impossible for one to observe any improvement in the position during the 2nd quarter of the year. A study of the monthly totals for the 3rd quarter show more satisfactory figures and some easing of the position. Late one evening in October I received a message from the Ministry of Agriculture asking me to serve form A on the manager of a local piggery, where disease was suspected. Soon afterwards the Ministry confirmed the existence of swine fever. During a visit to the "Infected Place", I found a vehicle loaded with surplus feeding stuffs preparing to proceed to one of the largest piggeries in the district. Precautionary instructions were given immediately and fortunately the disease was kept localised. There was no indication of a substantial improvement in the position throughout the last quarter of the year. One is able to assess more accurately the great concern and activity which this disease caused the responsible authorities by the serious annual figures published by the Ministry of Agriculture. Compared with last year the total was more than trebled, the respective figures being 2,713 against 891. Ninety local piggeries were visited during the year.

FOWL PEST

My first visit of the year arose from a report suspecting the existence of fowl pest at Drayton. After visiting the birds and carrying out a careful investigation, I was satisfied that the facts did not warrant my communicating with the Ministry of Agriculture. A few weeks later a second suspected case was reported to me, but after a thorough investigation I could not support the possibility of fowl pest. From experience one becomes accustomed to sudden fluctuations in the returns relating to this disease. Following extraordinarily high monthly totals for the previous two months, substantial decreases were recorded during February and March. Despite the fact that the comparable quarterly figures showed a sharp rise there was evidence of a considerable improvement in the position. After the Ministry of Agriculture experienced a serious setback in May, the position deteriorated rapidly and 231 outbreaks were detected in June. Striking comparative totals for the first half of the year were recorded, which were 508 this year against 121 at the same date in 1952. Following a substantial fall in the monthly figures for August there were indications in September that the Ministry was gradually recovering from the setback suffered earlier in the

year. Unsatisfactory returns began to re-appear in November and the position deteriorated again without recovery at the end of the year. No doubt the Ministry will regard the year as a most unfortunate and a costly one. Besides the great activity it caused, owners of infected flocks had to be paid compensation. 978 outbreaks were confirmed in 1953 compared with a total of 497 for the previous year.

PET ANIMALS ACT, 1951

This Act, which commenced on the 1st April, 1952, besides regulating the sale of pet animals from licenced premises, promotes their welfare. Twenty pet shops were licensed in the City during the year and 75 visits were made under the Act. Although the aims of this new Act are comprehensive and cover a considerable field, so far its operation has caused little trouble. Throughout the year I had no reason to believe that the general provisions of the Act designed for the careful protection of animals were not well observed.

FISH

The following is a list of the various species of fish relating to parcels surrendered after inspection and condemnation :—kippers, golden cutlets, roe, cod, bream, finnes mackeral, skate, coley, fillet, Danish sole, hake, whiting, trout, crab, flaps, prawns, shrimps, plaice, haddock, herring, cockles and dogs.

OTHER FOODSTUFFS

As in previous years practically all kinds of foodstuffs, other than fish, home-killed and imported meat already mentioned, were handled under this heading. Canned foods were an important item, 28,157 tins being surrendered as unfit for human consumption following inspection.

DUTIES AT THE PORT

No clinical evidence of the existence of any notifiable disease was detected in livestock landing at the Port and all animals were able to proceed to their destinations.

FOOD AND DRUGS ACT, 1938

No seizure was necessary during 1953. All foodstuffs unfit for human consumption were dealt with by surrender.

VISITS

1,912 visits were made during 1953, including 512 to meat premises (wholesale and retail), 168 to fish premises (wholesale and retail), 907 to provision shops (wholesale and retail), 90 to piggeries, 160 to sausage makers, 75 under the Pet Animals Act, 1951, and 493 relating to complaints.

INSPECTION AND SUPERVISION OF FOOD

FOOD AND DRUGS ACT, 1938

During the year 1,835 samples were taken under the Food and Drugs Act, 1938. Of these 96 were found to be adulterated, incorrectly labelled, or otherwise unsatisfactory, or 5·2%, compared with 8·0% in 1952. Of these 96 samples, 8 were formal samples, 87 informal or test samples, and 1 private purchase sample.

All the adulterated samples were dealt with by cautions or referred to the appropriate Ministry.

MILK (SPECIAL DESIGNATION) (PASTEURISED AND STERILISED MILK) REGULATIONS, 1949

During the year 132 licences were issued for the sale of pasteurised milk, 33 for sterilised milk, and 3 for tuberculin tested milk.

74 samples of tuberculin tested (pasteurised) milk were examined and all were found satisfactory.

348 samples of pasteurised milk were examined and 5 failed the test

52 samples of pasteurised milk as supplied to schools were examined and all were found satisfactory.

8 samples of sterilised milk were examined and all passed the test for this type of milk.

MILK

765 samples of milk were taken during the year and 39 were found to be adulterated and 89 not up to standard, the deficiencies being due to natural causes. Of this number, 324 represented milk supplied by farmers to retailers in the City, 36 being found to be adulterated.

ICE CREAM

101 samples of ice cream were taken for examination, with the following results :—

51 samples were Grade 1	14 samples were Grade 3
30 „ „ „ 2	6 „ „ „ 4

During the year 421 visits and inspections were made to ice cream premises.

DRUGS

158 samples of drugs were taken, and 11 were found not to be in accordance with the standards or requirements laid down in the Food and Drugs Act, 1938, the Pharmacy and Medicines Act, 1941, and the Poisons and Pharmacy Act, 1933.

MERCHANDISE MARKS ACT, 1926, AND ORDERS IN COUNCIL MADE THERE-UNDER

During the year 69 visits were made to business premises to see that the provisions of these Orders were being complied with.

REPORT OF THE CHIEF SANITARY INSPECTOR

W. F. APPLETON, M.R.SAN.I., F.S.I.A.

INTRODUCTION

The change of designation anticipated in my preface to the Annual Report of 1952 not having materialised, this report is presented under the old title.

Consideration has again to be given to the printing costs involved in the production of this report and comment on the whole field of work is accordingly impossible in the limited space available.

PUBLIC HEALTH ACT, 1936

GENERAL INSPECTION

3,089 complaints entered at the Department represented a slight increase in volume of work compared with 1952's figure of 3,000. Approximately 90% of these concerned general sanitary defects in dwelling houses and necessitated 8,327 inspections, resulting in the despatch of :—

Intimation notices	..	..	..	..	1,762
Abatement notices	..	..	..	..	700
"Without further delay" letters	..	..	..	..	251
"Within seven days" letters	..	..	..	..	124
					<hr/>
					2,837
					<hr/>

11,304 supervisory visits were paid whilst contractors were working on sites.

Recourse to court action was had in 37 cases, the proceedings resulting as hereunder :—

Adjourned <i>sine die</i>	..	..	..	..	..	5
Orders made for work to be done	..	..	..	..	..	14
Settled without legal proceedings	..	..	..	..	..	9
Withdrawn before case heard	..	..	..	..	..	6
Work completed before case heard but costs obtained						3
						<hr/>
						37
						<hr/>

Three defendants were required to appear before the Magistrates for further proceedings in regard to the above.

PERSONS INADEQUATELY HOUSED

An overall increase in work was achieved by this section during 1953, over 11,000 housing applications receiving individual consideration for the assessment of points under categories concerning insanitary conditions in dwelling houses and medical reasons affecting applicants' health. This figure was a rise of over 2,000 on that for 1952. Correspondingly, there occurred a five-fold increase in the number of investigations carried out in applicants' homes prior to allocation of Council accommodation, directly attributable of course to the remarkable spurt in the building programme. Members of Parliament, local councillors, medical practitioners, welfare workers, etc., etc., joined forces with the district inspectors and health visitors to draw attention to necessitous cases and 3,138 files were requested from the City Treasurer's

Department, as a result of which over 3,500 inspections of dwelling houses were made. Many of these premises were later subject to notices and the accomplishment of the required works meant great improvement in the environmental conditions of many of the applicants.

The well tested routine of previous years was adhered to and I again comment on the co-operation received from the City Treasurer's Department and also upon the satisfactory response from my colleagues of other authorities who provided information on applicants living outside Portsmouth.

As the direct result of conditions discovered during the investigation of housing applications 43 underground rooms were either made fit for human habitation or described as unfit for that purpose.

Sixteen houses or parts of houses were closed as unfit, as were also three caravans.

SUMMARY

(a) Housing applications requested by the Medical Officer of Health for assessment	3,138
(b) Housing applications referred to the Public Health Department by City Treasurer's Department for assessment	6,190
(c) Housing applications forwarded for investigation prior to allocation	1,827
(d) Housing applications requested for special consideration on grounds of T.B.	64
(e) *Housing applications issued to the sanitary inspectors	3,500
Total number of housing applications dealt with	11,219

*Note : this figure (e) included in (a) and (b).

HOUSING

Except for minor activity mostly concerned with measurement for permitted number, or the closure of unfit parts of houses, little recourse has been had to housing legislation. As this report goes to press we are girding our loins for the slum clearance offensive, which it is anticipated will figure largely in next year's report.

TENTS, VANS, SHEDS, AND MOVABLE DWELLINGS (SECTION 268 - PUBLIC HEALTH ACT, 1936)

CARAVAN SITES

The Corporation sites were superficially well maintained but the looked-for improvements at both Cliffdale and Great Salterns are not yet apparent. At the latter site the provision of sanitary accommodation has been agreed upon and, together with protection of the water supply against interruption by frost, is long overdue. So far, surveillance has shown no nuisance to arise from the existing cesspool.

Improved conveniences at the Henderson Road site have added to the amenities of this popular park, although minor complaints were recorded.

The two privately owned caravan parks have maintained the requisite standards, and a proposal for the extension of one is under consideration.

An increase in the sanitary accommodation at a temporary caravan site for persons operating a fun-fair was obtained by the Department.

INDIVIDUAL CARAVANS

The attention of the owner of land was drawn to the fact that use of the site for camping purposes by persons appearing at an adjoining theatre might constitute an offence, and the notice of the Chief Constable was similarly drawn to this practice.

One caravan on a Corporation site was found to be in such a condition that re-letting was prohibited, and two others were closed as unfit.

Three unauthorised parkings were terminated by the action of the Department, one of the removals being a fish and chip van.

Two applications to station caravans were made, and, meeting the requirements, were authorised on a temporary basis.

HOUSEBOATS

No houseboats were approved for berthing at the Corporation's Eastern Road site. One proposal for acceptance of a vessel into this site was investigated and the circumstances were not devoid of humour, although the success of the application was of serious concern to the owner. On asking for a report on the condition of the houseboat from the authority concerned, my colleague informed me that not only was the craft in such a condition that it would never survive the removal, but that the creek in which it was berthed was sealed off from the river during anti-flood operations, and therefore the possibility of the houseboat voyaging from the Thames to Portsmouth never really existed.

One houseboat owner was rehoused by the Local Authority and observed his undertaking to break up the vessel, and repairs to another houseboat were secured by threat of statutory action.

On receipt of a complaint an exhaustive report was made regarding the unsightly condition of the houseboat site, but it was found that no intervention was possible by this Department, there being only unsightliness and not insanitary conditions.

One contravention of clause 7, limiting the houseboat for occupation to a family unit, was discovered and removal of the sub-tenants resulted.

Sampling of the water supply to one houseboat revealed serious contamination due to the line from mains supply to tank being at one point under bilge water level.

WATER SUPPLY

The purity and potable qualities of the City's water supply were never questioned in 1953, and this acceptance of quality was borne out by the results of the analysis of samples taken as routine by both the Company and the Local Authority.

The year was remarkable for the passing of the last water supply to a dwelling house from other than the Company's mains. Since before World War II, when pollution of a shallow well occurred during floods at Farlington, the supply to two cottages from this source has been an anxiety to the Department and, although every endeavour was made to ensure a safe drinking water, the preoccupation of the war years prevented this until recently, when the necessary main brought the supply within practicable distance of the premises. Unfortunately for the owner, the increased costs of labour and material made the Corporation's contribution to his expenses proportionately small.

The Department considerably aided the Company during investigations

of other matters by the continued policy of notifying wastage and defective fittings, and by securing the reconnection of disconnected supplies.

SWIMMING BATHS, PADDLING POOLS, SEA WATER

102 samples of water were taken direct from the sea for bacteriological examination in connection with suspected pollution of beaches. Visits were also paid to the swimming baths and paddling pools and 73 samples of water were examined to ensure the efficacy of chlorinating plants.

CINEMATOGRAPH ACT AND STAGE PLAY LICENCES

The annual certification of premises resulted in 34 visits of inspection during which only two minor defects were found. These visits were in addition to routine checking of the cleanliness and ventilation of places of entertainment.

NUISANCES FROM DEPOSITS, DUST, SMELLS, ETC.

The investigation of offensive odours reported to the Public Health Department absorbs quite an appreciable amount of the inspectors' time, confronts them with unexpected dilemmas, and generally is annoying in that the smells are usually ephemeral. Realising that the effluvium itself is probably innocuous but that the origin may be prejudicial to public health, the inspector carries out a thorough investigation of each complaint. The time spent in tracing the cause is sometimes rewarded by discovering, say, a major defect in a drainage system, but more often the source lies in a simple thing like a bad egg or the decomposing body of a rodent, or perhaps the absence of a stopper from the rodding arm of an interceptor. Such minor causes are easier to remedy than the types which occurred in 1953 and concerned such varied establishments as a sewage disposal works, an offensive trades premises, a chapel of rest, and the concentrator plant.

Equally lengthy consideration is given to complaints concerning the sudden appearance of deposits. Where these are organic and the identity of the depositor can be established, removal or remedy of the nuisance is easily achieved. Regarding the depositing of inorganic matter, I refer such complaints to the Chief Constable for operation of the bye-laws preventing such offences, and I am happy to record the co-operation received from the police in this, as in other matters.

Passing from the subject of minor complaints brings me to the mysterious discolouration of paintwork of houses in the Copnor area by a film of fatty substance, presumably air-borne. Samples of the substance collected by my representative were submitted to the City Analyst. His report ruled out such theories as spray from diesel-engined trains on the adjoining tracks, processes from the adjacent gas works, and leakage from aeroplanes, as the material was not mineral in origin. The Analyst indicated that the fatty substance could have originated in smoke from a dwelling-house or garden fire, so investigations were not pursued further, but will be if there is a recurrence. It was concluded that this chance was negligible as the depositing appeared to depend on a number of unusual weather factors, including a humid misty atmosphere at lower level and the absence of dissipating winds higher up. These freak conditions, which prevailed at the occurrence, caused the dust and fat particles to be deposited on the comparatively cold surfaces of stone and paintwork.

Coal dust blowing from accumulations in the stock yards of various large firms caused considerable nuisance to residents in the neighbourhood.

Suggestions made by the inspector regarding improvements in the conveyor belt were acted upon and in several cases either improvement or abatement has resulted.

There are still a few properties within the City boundary the drainage systems of which are not yet connected to the public sewers and the cesspits serving these houses are emptied by the Corporation's vehicles. During the year the practice of emptying the contents into the nearest available road sewer-gully commended itself to the Department concerned by reason of economy of time and fuel, but vigilant residents drew the attention of the Public Health Department to this new procedure. It was pointed out to the Heads of the Departments concerned that the new method was prejudicial to the health of children who had easy access to the site of operation, and a scheme avoiding this was subsequently evolved and is now operating.

1953 saw the foreshore on certain of the City beaches suffer minor infestation of the now greatly publicised seaweed fly (*coelopa frigida*). Nothing so far being known of their disease-bearing propensities, these pests were treated only for their nuisance value. Various types of spraying and the burning of garnered seaweed, together with the arctic conditions experienced in February, appear to have had a cumulative effect on the larvae which penetrated into the shingle, and so far there has been no recrudescence, but as the warmer temperatures of 1954 have yet to be experienced it is wiser to await events than make premature forecasts. Certainly Portsmouth suffered only minor inconvenience as compared with sister authorities. The affinity of this fly for certain chemical processes led to four complaints being received from factories in the area. If the plague is rightly attributed to the vagaries of the Gulf Stream then as one indignant ratepayer expressed himself "It is up to the Corporation to alter the stream back!"

SMOKE ABATEMENT

The premier occurrence in this field of work during 1953 was undoubtedly the constitution of a South East Division of the National Smoke Abatement Society to cover the counties of Hampshire, I.O.W., Beds., Bucks., Essex, Herts., Kent, London, Middlesex, Oxfordshire, Surrey and Sussex. This division should simplify consideration of smoke abatement problems if only from the fact that easier access to the venues makes possible greater frequency of meeting.

SMOKE NUISANCES

Smoke observations were made on 155 occasions.

Complaints were made chiefly in the form of petitions signed by residents in the roads affected and were received usually when meteorological conditions had maintained a wind in one direction for several days.

Laundries were again the chief offenders and the prime nuisance occurred from an installation at North End. The experiment of firing two boilers with gas-coke was tried on the advice of the Regional Fuel Engineer, whose co-operation was sought and readily obtained in an endeavour to prevent the firm's management being proceeded against. Similar co-operation was sought regarding a Southsea Laundry, my aim being to seek every possible solution before asking for permission to institute proceedings. The experimental phase, however, is drawing to a close and considerable improvement has yet to be secured in the operation of the North End concern. One bottling store was allocated a more suitable type of fuel after a marked bout of smoke emission affecting blocks of newly erected flats. The incorrect

functioning of the thermostat of an O.B.P. caused a newly erected factory boiler to emit excessive smoke. This has since been adjusted correctly. Perhaps the most bizarre complaint dealt with in this part of the Department's work was that made by an irate ratepayer against a naval shore establishment which purposely generates the most amazing amount of black smoke at intervals every day to provide the necessary conditions for training fire-fighters. When this was passed to the Commanding Officer for information it was courteously observed that, whilst he regretted the inconvenience to the complainant, the nuisance would always be abated within two minutes provided the firefighters reached the requisite standard.

INFECTIOUS DISEASES

833 inquiries were made regarding the incidence of notifiable infectious diseases in the City and covered the investigation of scarlet fever, suspected diphtheria, erysipelas, cerebrospinal meningitis, acute poliomyelitis, malaria, dysentery, suspected typhoid, paratyphoid, sonne and other dysenteries, suspected undulant fever, food poisoning, as well as the possibility of infection entering the City by extra-mural contacts of smallpox, typhoid, poliomyelitis, etc.

No case of typhoid occurred in 1953, but four cases of paratyphoid were established, and originated from undiscovered sources. Examination, almost step by step, of the patients' movements, together with a detailed probe into their diets, led nowhere. In two cases a history of contact was discovered, but, although an open drainage system in one home and a minor infestation of houseflies in the other were found, no origin of infection figured. Where history of movement showed use of local beaches, examination of sea water was made for evidence of faecal pollution, but again without identifying any cause of infection. Extremes of ages in the patients were involved and accordingly the diets varied greatly. Ranges of food-stuffs examined included cockles, chipolatas, cream buns, caramels. In these, as in the bacteriological examination of houseflies, results were negative.

Two outbreaks of food poisoning marred a year in which otherwise there was less activity in intestinal disorders. One originated in a school canteen and involved over 50 children and staff. Immediate examination of specimens from the patients gave negative results and the nearest pointer to the cause was the discovery of a septic finger on one of the servers, evidence so slender as to make it preferable to attribute the outbreak to an unidentified toxin. The other outbreak, minor in character in that only four persons were involved, fined down to a Southsea cafe's product of meat pie. A waitress found to have served the pie was off sick and the inspector located her at home, suffering from facial boils. Swabs from the boils were found to contain an organism which so far has not been known to figure in cases of food poisoning. In connection with this case swabs were also taken of dishes, sinks, preparation tables, pig swill bins, etc., etc., without revealing any pathogens at the laboratory.

Twenty-eight cases of salmonella typhi-murium had similar inquests and as seems to be the general experience in the investigation of sporadic single cases no highest common factor existed to enable conclusions to be drawn. Examination of family contacts occasionally revealed the healthy excretor, but the organism was not found in specimens which included the ubiquitous and highly suspect duck's egg, cream and other buns, flour, sausages, sweets, etc. Sweepings of flour from the floors of all the local bakeries were also negative.

The holidays passed without the annual smallpox contact arriving in

the City and having to be sought out, although as usual the staff subjected themselves to the precaution of vaccination.

The morale-building routine of home disinfection was adhered to in the cases of infectious patients either immediately after their removal to hospital or on termination of their being nursed at home, and was in the capable hands of the Departmental disinfector, who disinfected 617 rooms, 172 public library books, some dozens of private library books, and 117 mattresses.

SUMMARY

Total inquiries re known or suspected cases of infectious disease	785
Visits and inquiries re contacts entering City	48
	<hr/>
	833

HEALTH EDUCATION

Interest in this particular field has been stimulated to the point where various public bodies request information on the work of the Department and I or certain members of the staff give lectures, talks or demonstrations, usually in our leisure time.

In 1953, organisations such as the Post War Brotherhood, boy scouts, church guilds, pupil midwives, student teachers, mothers' clubs, and Civil Defence, were attended by Departmental speakers and co-operation was again extended to the University of Southampton in order that health visitor students might receive practical training.

No displays or exhibitions were organised outside the Department by the sanitary inspectors.

RECEPTACLES FOR REFUSE

There has been no improvement in this matter, attention to which, as I commented last year, is long overdue. The inadequacy, variety, and dirtiness of things used in Portsmouth for storage of garbage is staggering to the student of hygiene, and is all the more inexplicable when it is realised that these uncovered filth encrusted horrors are, in many cases, carried through kitchens and living rooms to the front door for collection of the contents.

PESTOLOGY

To the annual catalogue of zoological and entymological complaints of infestations of mice, rats, bugs, fleas, lice, scabies, wasps, hornets, earwigs, woodlice, cockroaches, steam flies, furniture beetle, woolly bears, weevils, and mites, were added some newcomers. An infestation of a minor character affecting the front of a house was found to be due to larvae of a species of crane fly. Another adult weevil causing considerable anxiety to a householder was the domestically innocent clover weevil. Yet another beetle found strangely enough in a barber's shop was identified as the wharf borer. Pharoah's ants reappeared in the City. Conspicuous in its absence from the parade of strange creatures and parasites was that hitherto hardy annual the suspected colorado beetle.

LAND CHARGES INQUIRIES

Increased activity in both building and house purchase was noticeable in that 3,701 searches in the Departmental records were made against the

addresses of Portsmouth properties changing owners. This was an increase of 525 over last year's figure.

EXHUMATIONS

No faculties were granted by the Home Office for disinterment in the area of this authority.

FOOD

EXTRANEOUS MATTER IN FOOD

<i>Material or object</i>	<i>Found in</i>	<i>Action taken</i>
Staining	Bread	Referred to the C.S.I. of Authority of origin.
Glass fragment	Sweet	Ditto. Subsequently received from manufacturer an undertaking to replace glass containers with plastic ones.
Grease	Bread	Firm's process investigated and suggestions for elimination of contamination acted on by management.
Wood splinter	Biscuit	Referred to C.S.I. of Authority of origin.
Wire	Sweet	Ditto. Subsequently received from firm of origin undertaking to exercise even greater supervision on the condition of the wire sifters.

In all of the cases where foreign bodies were found in foodstuffs, immediate action was taken but no instance of incompetence in manufacture occurred. Investigation revealed either accident at a critical phase of a process which could not be seen and remedied, or the failure of material or machinery. No prosecutions resulted, the explanations of the manufacturers being accepted by the Committee, but warnings against repetition of the offences were given in each case.

CATERING ESTABLISHMENTS GENERALLY

The changing habits of the population since the war years can be observed in the extent to which small cafes and snack bars are now in evidence. In Portsmouth, prior to 1939, most meals were eaten at home or in the large catering establishments, or cafes attached to business houses. To-day, with many housewives engaged in industry, and with school-children's requirements met by the School Meals Service, more food is consumed outside the home than ever before, so that, whilst the cafe in England has not yet achieved the national popularity of its Continental counterpart, due chiefly to climatic and licencing conditions, eating out and communal dining are becoming an accepted part of daily life. The public's own discrimination, together with the vigilance of statutorily-empowered health officers, has weeded out most of the undesirable establishments. The surviving cafes now practise hygienic food handling standards which are yielding dividends, not only in cash to the proprietors, but also in reduced incidence of food poisoning to the general public. In any interviews with the Press bearing on food hygiene I have always stressed that, although routine inspection may ensure the cleanliness of places where food preparation is carried on, there is no supervision yet devised which can provide for continuous observance of personal hygiene, and it is in this particular that the co-operation of every citizen is sought. The public is asked to safeguard itself against infection by reporting breaches of hygiene

to the Public Health Department. Inevitably, out of the wealth of practical experience, sanitarians are finding the right proportions of explanation, exhortation and regimentation to make the British catering industry universally respected.

FOOD AND DRUGS ACT, 1938, AND CLEAN FOOD BYELAWS

Where contraventions of the provisions of the Food and Drugs Act, 1938, and/or Clean Food Byelaws were found, the offending managements were communicated with and the nature of the infringement stated. Sixty-two of these intimations were sent out and their requirements were secured without formal action. The work carried out has added to the perceptible improvement in the structural, decorative and hygienic condition of the City's food premises. Nevertheless, it remains a constant source of surprise and anxiety to find that some of the worst conditions exist in the biggest concerns, and would appear to be directly attributable to putting profit before responsibility to the public, especially during the peak holiday period. Thus, in the year now reviewed, a premier hotel and several of the larger Southsea cafes were inspected and found to be preparing or storing food in a manner or under conditions warranting prosecution, which action was only prevented by prompt alteration of the procedure or place.

The district sanitary inspectors often comment that their inspections during preparation and serving of food draw acid comment from proprietors and managements, who, when protesting, usually ask for a revisit when conditions are normal. It is obvious that the best observation is that made when a business is functioning, and not when an artificial atmosphere of cleanliness and order has been specially created.

A slightly lower number of inspections under Sections 13 and 14 resulted from the year's work on food premises, the decrease being attributable to the increase in routine district work. 3,097 was the figure achieved, and resulting from these inspections the following types of offence were discovered and remedied :—

Uncleanliness of persons	..	..	..	..	4
„ „ utensils	..	..	..	..	27
„ „ surfaces	..	..	..	..	32
Uncovered foodstuffs	..	..	..	..	25
Improper storage of foodstuffs	..	..	..	..	13
Non-provision of soap and towels	..	..	..	..	23
„ „ „ ablution facilities	..	..	..	..	31
„ „ „ hot and cold water	..	..	..	..	31
General defects and dilapidations	..	..	..	..	68
Non-provision of sanitary accommodation	..	..	..	..	9
Defective w.c's	..	..	..	..	7
Non-display of notices	..	..	..	..	12
Cracked crockery	..	..	..	..	1
Dirty, defective or otherwise improperly kept swill bins	..	..	..	..	13
Insanitary accommodation	..	..	..	..	8
No intervening ventilated space	..	..	..	..	1
Presence of flies	..	..	..	..	2
„ „ mice	..	..	..	..	1

FOOD PREMISES IN AREA BY TYPE OF BUSINESS

In accordance with Circular 1/54 of the Ministry of Health dated 12th January, 1954, an examination of the Departmental records augmented by

a check by the district inspectors resulted in the following figures being approximated. It will be realised, however, that, owing to the constantly changing business life in the City, the figures cannot be given with exactitude.

Grocers	..	..	..	..	..	..	546
Cafes	..	..	..	..	..	..	243
Butchers	..	..	..	..	..	..	170
Greengrocers	..	..	..	..	..	..	205
Cake shops	..	..	..	..	..	..	119
Sweet shops	..	..	..	..	..	..	244
Fishmongers (wet)	..	..	..	..	..	..	69
Fishmongers (fried)	..	..	..	..	..	..	80
Ice cream retailers	..	..	..	..	..	..	405
Shellfish	..	..	..	..	..	..	5
Bakeries	..	..	..	..	..	..	39
Breweries	..	..	..	..	..	..	3
Aerated mineral waters	..	..	..	..	..	..	6
Bottling depots	..	..	..	..	..	..	6
Bacon curing	..	..	..	..	..	..	2
Ice cream manufacturers	..	..	..	..	..	..	5
Potato crisp manufacturers	..	..	..	..	..	..	3
Meat pie manufacturers	..	..	..	..	..	..	7
Pickles manufacturers	..	..	..	..	..	..	1
Sugar graders	..	..	..	..	..	..	1
Sugar boilers	..	..	..	..	..	..	4
Sausage manufacturers	..	..	..	..	..	..	7
Spirit blenders	..	..	..	..	..	..	1
Tripe boilers	..	..	..	..	..	..	1
Tea blenders	..	..	..	..	..	..	1
Milk pasteurisers	..	..	..	..	..	..	7
							<hr/> 2,180 <hr/>

EDUCATIONAL ACTIVITY

No clean food guilds were inaugurated in the City, but the principle of disseminating information to hotel proprietors, staffs of catering industries, housewives leagues, civil defence personnel, etc., etc., was adhered to and where necessary augmented by articles in the local Press as, e.g., following an outbreak of salmonella infection in the north of England due to contamination of meat products, a paragraph was inserted in the local news urging the necessity for preparers of food to wash their hands after using the toilet.

MANUFACTURE OF ICE CREAM

The most exhaustive investigation ever carried out in the City into the source of contamination of ice cream resulted from complaints received from another authority about a Portsmouth product. It was stated that bacteriological examination of samples purchased from retailers in the area of that authority revealed the persistence of a faecal type of *b. coli*. The most stringent hygienic precautions, together with a practically new process of manufacture, failed to eliminate the contamination. Eventual dismantling of the entire plant took place, and I am happy to record that the co-operation of the firm concerned, the City Analyst's Department, the Public Health Laboratory, and Messrs. Deosan Ltd., resulted in the location of the foci of infection. The investigation is not yet complete and mention of this subject will be made in next year's report.

ICED LOLLIES

It is hoped that under the new Food and Drugs legislation, registration of all premises where iced lollies are manufactured will be compulsory.

SHELLFISH

GENERALLY

The taking of certain shellfish from beds within the area of the Port Health Authority, for sale or distribution to the public, without the shellfish being sterilized in an approved manner, is proscribed by the Portsmouth (Shellfish) Regulations, 1918. Attempts to elude this prohibition are usually based on grounds that the molluscs are taken for personal consumption. The publicity given to the Regulations having been intermittent from 1941 to 1952, a special revision was carried out in 1953. Poster sites were re-located and durable boards mounted on steel posts were erected at 36 points. Notices were also posted on numerous other public and police notice sites throughout the City so that all interested persons must by now be conversant with the legal requirements regarding local shellfishing. Unfortunately, vandalism has accounted for several of the newly erected notice boards, some having been completely destroyed.

No infringement of the Regulations was observed during the term of this report, but two persons approached the Department for approval of their methods for sterilizing shellfish. The joint requirements of the Food and Drugs Act, 1938, and the above-named Regulations were sufficient to prevent them from preparing or offering for sale the shellfish named therein.

Twenty-five visits were paid to shellfish vendors and premises.

BUTTERFISH

Like previous years, 1953 produced an infection allegedly due to shellfish. Investigation showed that butterfish evacuated from local beds were given away in a Portsea public house by the fisherman. A woman who ate one of the raw shellfish subsequently developed an illness thought to be paratyphoid B. No bacteriological confirmation of this was obtained from the patient's specimens and shellfish obtained from the same source as the original were found by the laboratory to be innocuous. The case was eventually attributed to shellfish allergy, and an undertaking was given by the fisherman that no further distribution would occur.

OYSTERS

A Press article envisaging an oyster harvest from ancient layings in Langstone Harbour caused an inquiry to be made into the possibility of illicit shellfishing, but the information given to the Press appeared to be highly coloured when traced to near its source, and, according to locals, referred to a few miniature bivalves dredged accidentally.

OTHER NEW FOOD PREMISES

GENERAL CATERING ESTABLISHMENTS, MOBILE CANTEENS

Thirty-three new catering businesses were established during 1953, their managements' applications being forwarded to me by the Food Executive Officer for checking the suitability of the premises as a preliminary to granting catering licences. This routine has worked well for the past few years and has prevented trading by unauthorised food vendors. Two vans were also licensed. Altogether, 42 premises were examined, of which seven failed to merit approval.

Summary

Inspections and visits	112
Applications referred to C.S.I.	42
Premises found to be satisfactory	33
Vans found to be satisfactory	2
Premises found to be insanitary	7

TOTAL .. 42

ICE CREAM RETAILERS

PRE-PACKED ICE CREAM

Thirty-five new names were added to the registered retailers of pre-packed ice cream in the City.

NON PRE-PACKED ICE CREAM

Two applications were successful.

MANUFACTURE OF ICE CREAM

One manufacturer of ice cream made application for a licence.

COOKED MEATS

Four registrations were made of premises used for the manufacture of cooked meats.

NUMBER OF FOOD PREMISES BY TYPE REGISTERED UNDER SECTION 14

Manufacturers of ice cream	5
Retailers of ice cream	405
Preserved, etc., (potted, pickled, pressed or pre-served, and sausages) Food Premises	59
Dairies registered under Milk and Dairies Regulations, 1949	7

SUMMARY OF WORK CARRIED OUT

INSPECTION OF PREMISES

Dwelling houses	8,327
New dwelling houses	1,532
Common lodging houses	3
Tents, vans, sheds, caravans, camping sites	288
Verminous premises	324
Houseboats	64
Offensive trades	14
Smoke, chemical and colour tests to old drains	379
Chemical and other tests to new drains	235
Housing Act, 1936	34
Housing Act, 1936 – permitted number survey	38
Underground rooms	181
Power factories	572
Non-power factories	93
Work places	11
Outworkers premises	48
Rag Flock Act, 1951	25
Shops Act, 1950	232
Town and Country Planning Act, 1940/48	68
Cinemas, theatres, circuses, fun-fairs, and other places of entertainment	34
Timber licences	1
W.D. buildings and sites	43
Public conveniences	21
Air raid shelters	6

Rodent control (not included in rodent control report)	163
Chapel of Rest	3
Nursery school and child minders	12
Beaches, re flies ; water samples, etc.	105
Re sewage disposal	20
Miscellaneous	12
Re animals	3
	<hr/>
	12,891

VISITS

To dwelling houses re notices and miscellaneous visits	15,874
To factories re notices	32
To rodent infested premises (not included in rodent report)	351
To new buildings re occupation certificates	2,254
Re obstructed and defective sewers	595
To swimming pools	73
To ships	77
	<hr/>
	19,256
Inspections	12,891
	<hr/>
	32,147

INSPECTION OF FOOD PREMISES

Ice cream manufacturers	142
Ice cream retailers	382
Tripe boilers	1
Bakeries	179
Shellfish vendors	25
School meal cooking depots	7
Municipal restaurants	6
Fish friers and fishmongers	171
New registrations	77
Dairies	156
Restaurants, cafes, etc.	879
Potato crisp manufacturers	14
Mineral and aerated water bottlers	5
Beer bottlers	4
Pickle manufacturers	1
Flour packers	1
Coffee and tea packers	2
Preserved food premises	16
Other food shops	497
Hotel and home kitchens	27
Street vendors	20
Breweries	2
Section 13, Food and Drugs Act, 1938	3,097
Bacon smokers	2
Fish and meat markets	6
Re meat and food condemnation	105
Miscellaneous visits	213
	<hr/>
	6,037
	32,147
	<hr/>
	38,184

NOTICES AND NOTIFICATIONS

Abatement notices, Public Health Act, 1936	700
Letter forms re defects (intimation notices)	1,762
Letters requiring execution of work "without further delay"	251
Letters requiring execution of work within "seven days"	124
Notice of intention to enter buildings	9
Dangerous buildings	99
Permitted number, Housing Act, 1936	22
Obstructed or defective sewers	316
Occupation certificates	919

Factories Act Section 7	14
Informal notices Factories Act, 1937	13
Shops Act	20
Sanitary certificates	2
Section 13 Food and Drugs Act, 1938	9
Premises or parts of premises closed (including one attic)	16
Notification by external authorities of closure of premises in their area	2
Basements or underground rooms notified to owners for remedy or closure	43
Caravans	3

4,324

INVESTIGATIONS

Recorded complaints	3,089
Additional unrecorded complaints	472
Smoke nuisances	155
Infectious diseases	785
Typhoid cases (suspected)	4
Paratyphoid B. (and suspected paratyphoid B. cases)	45
Smallpox, typhoid, etc. contacts	48
Council house applications and transfers	3,500
Council accommodation allocations	1,827
Food poisoning and suspected food poisoning cases	72
Cleanliness in factories	10
Verminous persons and premises	169
Rodent infestation complaints (not included in rodent report)	144
Mosquito infestation	3
Various, including deposits of oil, etc.	60
Sea water	102
Swimming and paddling pool water	73

10,558

Drains cleared	188
Drains repaired or relaid	144
New w.c. pans provided	49
New pedestal closet pans provided	65
W.C. fittings repaired	138
Flushing apparatus to w.c. provided	24
W.C. ventilated	11
W.C. cleansed	29
Gratings provided to gully traps	26
Glazed stoneware sinks provided	45
Sink waste pipes repaired, trapped or renewed	118
Rainwater spouting cleansed or repaired	517
Roofs repaired	883
Weather slating repaired or external walls protected	278
Floors, stairs, or doors repaired	557
Sashes, lines, sills, glazing or sashframes repaired	6,016
Damp courses provided or repaired	142
Houses or parts of houses cleansed or distempered	41
Houses or parts of houses repaired	1,886
Sanitary dustbins provided	56
Space beneath floors ventilated	43
Yards, stables, sties, etc., repaved	23
Foundation of house concreted	1
Water supply laid on or water service repaired	49
Factory floors repaired	12
Cooking ranges or firegrates repaired or renewed	170
Other nuisances in dwelling houses abated	274
Manure and refuse removed	14
Animals removed	1
Stagnant water removed	3
Bedding cleansed or destroyed	21
Yards, stables, sties, etc., cleansed	4

RODENT CONTROL

Number of complaints received	.. ..	2,200
Number of premises visited during survey	..	3,929
		<hr/>
	Total ..	6,129
Number of premises treated	.. ..	3,321

Of the above 3,321 premises treated, 2,665 were private dwelling houses, 502 business premises and 154 local authority premises. Included in the business premises are 12 naval establishments. Of the 3,321 premises treated, 16 were major infestations (rats), 1,517 minor infestations (rats) and 1,788 minor infestations (mice).

THE ESTIMATED KILL DURING THIS PERIOD:—

City's sewerage system : manholes 4,155	.. ..	13,743 rats
Dwelling houses	}	8,456 „
Business premises		
Local authority premises		
		<hr/>
Total estimated kill	..	22,199

Refuse tips, sewage disposal works, docks, foreshores, and the foul sewers were treated twice during the year.

Treatments were carried out for the destruction of rats and mice on the British Railways system in the City and good results were obtained.

The contract between the Local Authority and the Director of Navy Contracts continues in operation.

MOSQUITO CONTROL

The low-lying areas and mosquito breeding places within the City have continued to be under surveillance of the staff of the former British Mosquito Control Institute in accordance with the agreement with Havant and Waterloo U.D.C., together with the active co-operation of a member of my staff. Oiling and ditching have been regularly carried out and the breeding of mosquitoes reduced to a minimum.

RAG FLOCK AND OTHER FILLING MATERIALS ACT, 1951

Thirty inspections were made to the one premises licenced and the 22 registered under the above Act.

REPORT ON CLEANSING

I am indebted to the Manager of the Cleansing and Haulage Department for the following report on the Cleansing Service during the year :—

“Refuse collection has continued throughout the year at weekly intervals. A new rear-loading Dennis Paxit machine was put into operation and is proving a great success. A total of twenty-two refuse collection vehicles, including one especially designed for the collection of refuse from flats and two detritus vehicles (for removal of refuse from hospitals and institutions) collected a total of 63,000 tons of refuse during the year from 64,000 premises. Some 2,000 tons of trade refuse were also removed during the year.

Controlled tipping continued at Great Salterns and some 65,000 tons of refuse were dealt with. The tip is fully mechanised with one bulldozer, two excavators and one general purpose tractor. Valuable land reclamation has taken place, and the present site is rapidly nearing completion.

There are 520 miles of channelling to be swept in Portsmouth ; main roads continued to receive daily attention from the street orderlies and the two mechanical sweepers continued to give satisfaction. A new electric pedestrian controlled sweeper's truck was put into service at Paulsgrove to cope with the job of keeping that estate in good order. In addition to road sweeping, 100 sweepers were responsible for making the roads safe in times of inclement weather.

The two gully machines serviced 23,800 gullies during the year and 330 domestic cesspits continued to receive monthly service from three cesspit emptying machines. In addition, these machines cleared cesspits of many large factories in many cases giving a daily service.

The reclamation of waste materials, namely, paper, rags, bottles, metals, and bones, from the refuse is now a recognised part of the activities of the Department. Much of this material is kept separate at the source but men are employed on sorting at the tips. In 1953 an average of 140 tons of waste paper per month were disposed of through local merchants, in addition to textiles. All baling takes place at the Central Depot.

It is heartening at this time to know that the salvage market is relatively steady and that all materials can be disposed of as fast as they are salvaged.

The concentration of kitchen waste into pig food is continuing, but in 1953, in common with other operators of like plants, the Portsmouth plant had, for the first time since the war, to compete with the freeing of meal and grain and the lifting of controls. This resulted in a temporary setback, but it is hoped that 1954 will see an improvement.”

PORT HEALTH AUTHORITY

Public Health Department,
Municipal Offices,
1 Western Parade,
Portsmouth.

To the Chairman and Members of the Port Health Authority.

Ladies and Gentlemen,

I have the honour to present my Report on the work of the Port Health Authority of Portsmouth during the year 1953.

SECTION I — STAFF.

No change.

SECTION II — AMOUNT OF SHIPPING ENTERING THE DISTRICT DURING THE YEAR

TABLE B

Ships from	Number	Tonnage	Number Inspected		Number of ships reported as having, or having had during the voyage, infectious disease on board
			By the Medical Officer of Health	By the Sanitary Inspector	
Foreign Ports ..	361	79,467	—	37	1
Coastwise* ..	2,324	523,335	—	111	—
Total	2,685	602,802	—	148	1

*Includes local traffic between Southampton, Isle of Wight and Portsmouth.

SECTION III — CHARACTER OF SHIPPING AND TRADE DURING THE YEAR

TABLE C

There was no passenger traffic during the year.

Cargo Traffic. The principal imports were coal, cement, stone, oil, timber, glassware, building materials, tomatoes, onions, potatoes, cauliflower, citrus fruits, apples, pears, peaches, nuts, and general cargo traffic, from France, Italy, Holland, Belgium, Germany, Sweden, Finland, Norway, North Africa, Spain, and Channel Islands.

The principal exports were pitch, machinery, scrap iron, fertilisers, barley, and general cargo.

SECTION IV — INLAND BARGE TRAFFIC

There is no inland barge traffic.

SECTION V — WATER SUPPLY

No change.

SECTION VI — PUBLIC HEALTH (SHIPS) REGULATIONS, 1952

No change.

SECTION VII — SMALLPOX

- (1) Cases of smallpox are removed to the smallpox hospital at Crabwood, near Winchester.
- (2) Cases are conveyed by the Portsmouth Municipal Ambulance and Medical Car Service, the vaccinal state of the ambulance crews being : four vaccinated in 1953, 13 in 1952, 17 in 1951, three not known.
- (3) The smallpox consultant is Dr. I. M. McLachlan, Physician Superintendent, Infectious Diseases Hospital, Portsmouth (Tel. 2046).
- (4) Facilities for laboratory diagnosis of smallpox exist, by arrangement with the Portsmouth and Isle of Wight Area Pathological Service, at the Central Laboratory, Infectious Diseases Hospital, Portsmouth.

SECTION VIII — VENEREAL DISEASE

No change.

SECTION IX — CASES OF NOTIFIABLE AND OTHER INFECTIOUS DISEASES ON SHIPS

TABLE D

Category	Disease	Number of cases during the year		Number of ships concerned
		Passengers	Crew	
Cases landed from ships from foreign ports	Suspected tuberculous meningitis (not confirmed)	1	—	1
Cases which have occurred on ships from foreign ports, but have been disposed of before arrival	—	—	—	—
Cases landed from other ships	—	—	—	—

On Wednesday, 16th December, 1953, at 3 p.m., the Medical Officer of Health received a message from the office of the Union Castle Line, Southampton, that the s.s. *Rhodesia Castle*, en route from Cape Town to London, wished to land a child who was seriously ill with suspected tuberculous meningitis. It was accordingly agreed that the liner would be met at Spithead by a launch from Portsmouth, and the patient was transferred thereto and conveyed to the Infectious Diseases Hospital for urgent treatment. The condition ultimately proved to be a type of acute demyelinating encephalitis, from which the patient made a good recovery.

SECTION X — OBSERVATIONS ON THE OCCURRENCE OF MALARIA IN SHIPS

No malaria occurred in ships during the year.

SECTION XI — MEASURES TAKEN AGAINST SHIPS INFECTED WITH OR SUSPECTED FOR PLAGUE

No plague or suspected plague occurred in ships during the year.

SECTION XII — MEASURES AGAINST RODENTS IN SHIPS FROM FOREIGN PORTS

- (1) Vessels arriving from abroad are examined periodically by the Port Health Inspector. Rat disinfestation is carried out by the Rodent Control Section of the Health Department in the port area.
- (2) Bacteriological or pathological examination of rodents can be carried out at the Central Laboratory, Infectious Diseases Hospital ; none was examined during the year.
- (3) The Port is not approved for the deratting of ships and, by agreement with Southampton Port Health Authority, this is undertaken by them. Three certificates were issued in respect of local coastwise vessels during the year.
- (4) When necessary, rat guards are placed on ropes between ships and quays.

TABLE E

Rodents Destroyed during the Year in Ships from Foreign Ports

Category	Number
Black rats	—
Brown rats	—
Species not known	—
Sent for examination	—
Infected with plague	—

TABLE F

Deratting Certificates and Deratting Exemption Certificates issued during the year for ships from foreign ports.

(Not applicable.)

SECTION XIII — INSPECTION OF SHIPS FOR NUISANCES

TABLE G

Inspections and Notices

Nature and Number of Inspections	Notices served		Result of serving Notices
	Statutory Notices	Other Notices	
Primary, 134	—	29	—
Others, 14	—	—	22 complied with
Total 148	—	29	—

SECTION XIV — PUBLIC HEALTH (SHELLFISH) REGULATIONS, 1934 & 1948

No change.

SECTION XV — MEDICAL INSPECTION OF ALIENS (APPLICABLE ONLY TO PORTS APPROVED FOR THE LANDING OF ALIENS)

No change.

SECTION XVI — MISCELLANEOUS

No change.

I desire to express my thanks to the Queen's Harbour Master and H.M. Collector of Customs and their staff for their cordial co-operation and valuable assistance during the year, and to record my appreciation of the excellent service rendered by the Port Health Inspector.

I have the honour to be, Ladies and Gentlemen,

Your obedient servant,

T. E. ROBERTS,
*Medical Officer of Health,
City and Port of Portsmouth.*

27th February, 1954.

THE PUBLIC ANALYST'S REPORT

THE PUBLIC ANALYST'S DEPARTMENT,
TRAFALGAR PLACE,
CLIVE ROAD,
PORTSMOUTH.

To the Chairman and Members of the Health and Housing Committee.

I have the honour to submit my Annual Report on the work carried out in my Department during the year 1953.

The total number of samples submitted for examination was 3,316. These may be summarised as follows :—

Food and Drugs Act	..	..	..	..	1,835
Designated Milk	..	..	..	..	430
Ice Cream (Hygienic quality)	..	..	..	..	101
City Water	..	..	..	..	51
Swimming Bath Water	..	..	..	..	73
Fertilisers and Feeding Stuffs Act	..	..	..	..	12

SAMPLES EXAMINED FOR :

Borough of Gosport	..	..	..	..	134
Isle of Wight County Council	..	..	..	..	174
Other Local Authorities	..	..	..	..	70
Corporation Departments	..	..	..	..	173
Miscellaneous	..	..	..	..	263
TOTAL					3,316

Of the 1,835 samples purchased in the City of Portsmouth and submitted for analysis under the Food and Drugs Act, 96 (equal to 5·2%) were found to be adulterated, incorrectly labelled or otherwise unsatisfactory.

I am glad to take this opportunity of expressing my appreciation of the efficient and loyal service of the technical and clerical staff and the valuable co-operation of the Sampling Officer.

I am, Mr. Chairman and Members,

Your obedient servant,

A. L. WILLIAMS,
Public Analyst.

Nature of Sample	Number Examined	Number Genuine	Number Irregular
Foods			
Milk	765	726	39
Alcoholic Beverages	10	10	—
Baking Powder	10	8	2
Beef Suet	13	13	—
Blancmange Powder	6	5	1
Bread	3	3	—
Butter	48	48	—
Cake Mixtures	11	9	2
Canned Fish	21	21	—
Canned Fruit	4	4	—
Canned Meat	4	4	—
Canned Soup	13	13	—
Canned Vegetables	14	14	—
Cereals	13	13	—
Cheese	48	48	—
Cocoa	9	9	—
Coffee	6	6	—
Coffee and Chicory preparations	10	10	—
Condensed Milk	6	6	—
Cooking Fat and Dripping	53	53	—
Cornflour	5	5	—
Cream	23	23	—
Cream of Tartar	1	1	—
Curry Powder	7	7	—
Custard Powder	1	1	—
Cut Peel	10	9	1
Dried Herbs	12	12	—
Fish Paste	2	2	—
Flour	13	13	—
Fruit Curd	8	8	—
Gelatine	3	3	—
Glace Cherries	5	3	2
Ground Almonds	7	7	—
Honey	5	5	—
Ice Cream	46	46	—
Ice Lollies	37	21	16
Jam and Marmalade	45	45	—
Margarine	48	48	—
Meat Paste	7	7	—
Mincemeat	7	7	—
Mustard	3	3	—
Nuts Prepacked	1	—	1
Pea Flour	3	3	—
Pickles and Sauce	13	13	—
Pudding Mixtures	2	2	—
Rice	3	3	—
Saccharin Tablets	10	6	4
Salad Cream	4	4	—
Sandwich Spread	3	1	2
Sausages and Sausage Meat	34	27	7
Soft Drinks	23	22	1
Spices	22	22	—
Sugar	48	48	—
Sugar Confectionery	47	43	4
Syrup and Treacle	3	3	—
Table Jelly	28	28	—
Tea	47	47	—
Vinegar	23	21	2
Yoghourt	1	—	1
Total Foods ..	1,677	1,592	85

Nature of Sample	Number Examined	Number Genuine	Number Irregular
Drugs			
Aspirin Tablets	7	7	—
Borax	2	2	—
Boric Acid Crystals	1	1	—
Boric Acid Ointment	5	5	—
Camphorated Oil	1	1	—
Castor Oil	4	4	—
Cod Liver Oil	4	4	—
Cod Liver Oil Emulsion	4	4	—
Compound Syrup of Figs	1	—	1
Cough and Influenza Mixture	1	1	—
Cough Mixtures	14	14	—
Cream of Magnesia	2	2	—
Eastons Syrup	8	5	3
Embrocation	1	1	—
Emulsion of Liquid Paraffin	7	7	—
Epsom Salts	2	2	—
Friars Balsam	8	6	2
Gripe Water	1	1	—
Glycerin	2	2	—
Headache Powder	1	1	—
Lanoline Ointment	1	1	—
Liquid Paraffin	5	5	—
Olive Oil	3	3	—
Parrish's Chemical Food	4	4	—
Petroleum Jelly	2	2	—
Sodium Bicarbonate	7	7	—
Stomach Powder	1	1	—
Sulphur and Lime Lozenges	3	3	—
Sulphur Ointment	15	15	—
Tincture of Iodine	14	11	3
Zinc Ointment	8	8	—
Zinc, Starch, Boric Acid Powder	8	6	2
Zinc and Castor Oil Cream	11	11	—
Total No. Drugs ..	158	147	11

	Foods	Drugs	Foods & Drugs
Number Examined	1,677	158	1,835
Number Irregular	85	11	96
Percentage Irregular	5·1	7·0	5·2

CHANGES IN LEGISLATION

Some of the 1953 legislation which affects the work of this Department is as follows :—

The Offals in Meat Products Order 1953 : prohibits the use of certain offals in uncooked open meat products.

The Food Standards (Preserves) Order, 1953 : specifies revised standards for jams and marmalade with regard to minimum fruit content.

The Food Standards Ice Cream Order, 1953 : restores the higher standards of 5% and 7·5% respectively concerning minimum fat and milk solids-not-fat, from June, 1953, i.e., the standards which were in operation before the reduction made in July, 1952.

The Food Standards (Saccharin Tablets) Order, 1953 : requires that all sweetening tablets containing saccharin shall contain between 0·18 and 0·22 grain of saccharin in each tablet.

The Artificial Sweeteners in Food Order, 1953 : prohibits use of artificial sweeteners other than saccharin in food products for human consumption.

The Public Health (Condensed Milk) (Amendment) Regulations, 1953 : allow for a limited period the sale of full cream unsweetened condensed milk containing minimums of 7·8% milk fat and 25·5% total milk solids including fat, imported by the Ministry of Food.

The Public Health (Preservatives, etc., in Food) (Amendment) Regulations, 1953 : these Regulations (a) permit certain dehydrated vegetables to contain sulphur dioxide provided that a specified maximum amount is not exceeded ; (b) increase the maximum permitted sulphur dioxide in jam from 40 p.p.m. to 100 p.p.m. ; and (c) permit presence of diphenyl in citrus fruits imported in diphenyl treated wrappers (maximum limit specified for wrappers).

The Labelling of Food (Amendment) Order, 1953 : substantially re-enacts in revised form the Labelling of Food Order, 1950, with introduction of certain new provisions including requirements as to the labelling of French and Viennese coffee.

The Food Standards (Soft Drinks) Order, 1953 : replaces the Soft Drinks Order, 1947, and provides modified standards of minimum sugar and maximum saccharin for certain soft drinks, including ginger beer, herbal beers and beverages for diabetics.

MILK

Milk is examined in this laboratory from two aspects – chemical and bacteriological. Chemical composition seeks to disclose added water, added preservative and added colouring matter, all of which are prohibited ; in addition, the chemical composition indicates any deviation from average quality from a nutritional point of view.

Testing for hygienic quality includes an examination which will indicate whether the milk contains excessive numbers of bacteria – sufficient to impair the keeping quality – and an indication of the efficiency of the process of pasteurisation and sterilisation which, when carried out in the prescribed manner, guarantee that milk is free from the organisms of tuberculosis and other pathogenic diseases.

CHEMICAL EXAMINATION

All the 765 samples of milk which were examined in 1953 were free from added colour and preservative.

The source of the samples was as follows :

389 from retailers selling to the public.

324 from farmers delivering to local dairies.

52 from deliveries of one-third pint bottles to various schools.

Only 10 samples contained added water and in each case the proportion was of the order of 1 to 2 per cent, indicating carelessness rather than fraud. Farmers were responsible for 8 samples, and dairymen for 2 samples.

All the 52 samples of school milk were satisfactory.

The fat in 29 samples failed to reach the minimum limit of 3·0% but deliberate skimming was not suspected. When there is an excessively long time interval between the night and morning milking, the fat is high in the former but low in the latter. The fat deficient samples came from 15 different herds and in each case it was found that when the two consecutive milkings were mixed together, the whole consignment satisfied the limit for fat. The variation between morning milk and evening milk is a matter which does not affect the public so long as dairymen have regard to the variation when mixing milk prior to pasteurisation and bottling.

Milk inferior in another respect, i.e., deficient in solids other than fat, was noted in 60 samples. These non-fatty solids consist of milk protein, milk sugar and mineral salts ; all nutritional experts regard these solids as being of greater importance than the fat of milk. Deficiencies are invariably due to bad breeding and unbalanced feeding and the 18 farmers responsible for these samples were advised accordingly.

During recent years, analysts throughout the country have commented on the increasing number of herds yielding milk with solids other than fat inferior to the limit of 8·5%. It is, of course, an offence for a farmer to add water to milk but it is not an offence if he selects a breed which will give him a larger yield of inferior milk or if he selects a diet which encourages the cow to put extra water in the milk. This problem has recently been studied by a Working Party who have reported that it is impracticable to devise a scheme which would give the farmer a better price for high quality milk and a lower price for inferior quality. It is suggested that the deterioration in the quality produced by many herds can be best arrested by an educational policy of persuading farmers to avoid all practices which are known to lead to poor quality and increased research into the causes.

It is interesting to note that although an appreciable number of the 51 herds which were tested during the year showed marked variations in quality, the mixed milk sold to the public by dairymen was equal to the quality of previous years. Clearly there are sufficient first class herds to compensate for the inferior herds.

AVERAGE COMPOSITION OF MILK SOLD TO THE PUBLIC
(CHANNEL ISLAND MILK EXCLUDED)

Month	Fat	Solids-not-Fat	Total Solids	No. of Samples examined
January	3·77	8·64	12·41	27
February	3·74	8·61	12·35	29
March	3·63	8·56	12·19	31
April	3·52	8·63	12·15	26
May	3·53	8·76	12·29	26
June	3·53	8·62	12·15	28
July	3·50	8·59	12·09	30
August	3·84	8·65	12·49	35
September	3·72	8·76	12·48	33
October	3·83	8·79	12·62	27
November	3·99	8·71	12·70	38
December	3·92	8·65	12·57	35
Average 1953 ..	3·71	8·66	12·37	365
„ 1952 ..	3·76	8·70	12·47	391
„ 1951 ..	3·79	8·67	12·46	374

CHANNEL ISLAND MILK

A Ministry of Food Order permits a higher price to be charged for milk produced by Channel Island breeds provided that the fat content is not less than 4·0%.

During the year 115 samples of this type of milk were examined, 67 from pint bottles sold to the public by dairymen and 48 samples from farmers' deliveries.

All the samples of mixed milk sold to the public were satisfactory but two farmers were found to be sending consignments with only 3·6 and 3·8% of fat. This quality did not justify the higher price and the Ministry of Food were informed accordingly.

The average quality of Channel Island Milk and ordinary milk, as sold to the public, is as follows :—

					Average Fat per cent	
					Channel Island Milk	Ordinary Milk
1953	..	..	..	..	4·50	3·71
1952	..	..	..	..	4·54	3·76

HYGIENIC QUALITY OF MILK

All the milk sold in the City is either pasteurised or sterilised. It is illegal to sell raw milk in this area unless it comes from a T.T. herd or, temporarily, from an accredited herd.

The law provides for regular laboratory testing to ensure that the processes of pasteurisation and sterilisation are efficient and 430 samples of milk were examined during the year.

The public can be assured that when milk satisfies the tests for efficiency of heat treatment, such milk can be guaranteed to be free from pathogenic organisms.

Similarly a test for keeping quality ensures that milk will keep sweet for at least 24 hours if stored under normal and reasonable conditions. If, however, the shade temperature exceeds 65°F. the keeping quality test is held to be void ; presumably stringent control in very hot weather is unfair to the dairymen.

In 1953, 5 samples of pasteurised milk failed the statutory test for efficiency of pasteurisation. In each case the fault was speedily traced and corrected with the willing co-operation of the dairymen.

ICE CREAM

NUTRITIVE QUALITY

Ice cream consists of a mixture of sugar, milk, margarine, emulsifying agent and flavour. Minimum standards are prescribed by law for the fat, milk solids and sugar.

The minimum standards were temporarily reduced in 1952 (fat from 5% to 4% and milk solids from 7½% to 5%), but the original standards were restored in 1953 with effect from June 1st.

The analysis of 46 samples in 1953 indicates that most manufacturers produce a product which is considerably richer in fat than legislation requires, as shown by the following results :—

Fat Content of Ice Cream :

Fat per cent	1953 No. of Samples	1952 No. of Samples
Under 5.0	0	2
5.0 – 7.9	13	9
8.0 – 9.9	8	8
10.0 or more	25	16
	—	—
	46	35
	—	—

Ice cream is a nutritious article of food and manufacturers spend considerable sums of money to advertise the fact. Accordingly it is necessary to impose a minimum nutritive quality for an article described as ice cream, but it is a fact that the consumer also regards palatability as important and a successful manufacturer must also provide a smooth texture, adequate aeration and attractive flavour.

War-time restrictions have encouraged acceptance of such descriptions as “creamy ices” and “cream ice” for an article containing margarine. One wonders what description is left for the manufacturer who first markets a true ice cream made from genuine dairy cream without margarine.

HYGIENIC QUALITY

Because it is nutritious, ice cream is the type of food which encourages a trace of bacterial contamination to grow at an alarming rate. The ingredients of an ice cream mix are similar to those which are used to produce speedy growth of bacteria in laboratory experiments. For this reason, factory plant should be thoroughly cleansed and sterilised before and after use, and handling of the frozen product should be avoided in packing and distribution. The importance of this aspect of the ice cream trade is demonstrated to all those concerned by a laboratory test which measures

the chemical activity of the organisms present in the product. The quality is expressed in grades 1 to 4 and the results are used to trace those manufacturers and retailers who can profit from inspection and advice.

The 1953 figures indicate that this sampling and testing of ice cream is gradually teaching all those concerned in the preparation and handling of ice cream that hygiene is most important. Credit is due to the Sampling Officer (Mr. F. R. Bell), who gives advice to those responsible for inferior and unsatisfactory samples.

		1953	1952	1951
		101 samples	95 samples	148 samples
Satisfactory :	Grade 1	50% } 80%	36% } 62%	53% } 74%
	„ 2	30% }	26% }	21% }
Inferior :	„ 3	14%	18%	16%
Unsatisfactory :	„ 4	6%	20%	10%

SAMPLES OTHER THAN MILK NOT IN ACCORDANCE WITH STANDARD

No.	Nature of Sample	Formal Informal Private	Nature of Offence	Observations
D17	Caramel Dessert Powder	I	Label offence – incomplete list of ingredients	Label to be amended.
D28	Eastons Syrup	I	Not B.P.C. quality.	Inaccurately prepared from stock solution. Caution.
D188	Eastons Syrup	F	Unsatisfactory label	
D50	Tincture of Iodine B.P.	I	Iodine 2.25% w/v. Def. 8% of minimum limit prescribed by B.P. 1948	Stock withdrawn from sale.
D172	Tincture of Iodine B.P.	I	Iodine 2.25% w/v. Def. 8% of minimum limit	
D173	Tincture of Iodine B.P.	I	Iodine 1.80% w/v. Def. 26% of minimum limit	
D204	Pork Sausages	I	Contained 80 p.p.m. undeclared SO ₂ preservative	Caution.
D187	Kiddies' Fountain	I	Label offence – inaccurate statement of ingredients	Label amended.
D205	Pork Sausage Meat	I	Total meat 47%. Def. 27% of minimum standard of 65%	Caution.
D283	Pork Sausage	F	Total meat 54%. Def. 17% of minimum standard of 65%	Caution.
D307	Nut Kernels (Pre-packed)	I	Label offence – no specific designation of the nuts	Label amended.
D245	Baking Powder	I	Available CO ₂ 7.2%. Def. 10% of minimum standard	Stock withdrawn from sale.
D348	Baking Powder	I	Available CO ₂ 7.1%. Def. 11% of minimum standard	
D369	Sponge Mixture	I	Def. of available CO ₂ . Contaminated with live mites	Stock withdrawn from sale.
D416	Pork Sausages (75% Pork)	I	Total meat 64%. Description "75% Pork" false	Caution.
D417	Peppermint Butterscotch	I	Label offence – falsely implied that all the added fat was butter fat. Liquid glucose described as "Glucose" unqualified	Label to be amended.
D437	Malt Vinegar	I	Contaminated with vinegar eels	Stock withdrawn from sale.

No.	Nature of Sample	Formal Informal Private	Nature of Offence	Observations
D486	Yoghourt	I	Label offence—no address where packer carried on business	Label amended.
D506	Sponge Mixture	I	Def. 35% of minimum amount of CO ₂ . Live mites present	Remaining stock destroyed.
D615	Cream Lolly (Pre-packed)	I	Label offence—no list of ingredients	Label amended.
D695	Cream Lolly (Pre-packed)	I		
D616	Ice Lolly (Pre-packed)	I	Label offence—the word “Stabiliser” used in list of ingredients—not a specific description	Label amended.
D696	Ice Lolly (Pre-packed)	I		
D612	Ice Lolly (Pre-packed)	I	Label offence—no designation of the food; no list of ingredients	Label amended.
D693	Ice Lolly (Pre-packed)	I		
D551	Savoury Welsh Rarebit	I	Label offence—“Edible Gum” used in list of ingredients—not a specific description	Labels amended.
D552	Savoury Spread with Gorgonzola	I		
D796	Fruit Lolly (Pre-packed)	I	Label offence—the word “Stabiliser” used in list of ingredients—not a specific description	Label amended.
D797	Ice Lolly (Pre-packed)	I	Label offence—no statement of ingredients	Label amended.
D801	Ice Lolly (Pre-packed)	I	Label offence—no designation of the food; no list of ingredients	Label amended.
D812	Butterscotch (Old English)	I	Contained no butter-fat	Stocks withdrawn from sale. Manufacturer cautioned.
D1095	Butterscotch (Old English)	F		
D819	Saccharin Tablets	I	Contained 0·14 grains and 0·15 grains saccharin per tablet instead of not less than 0·18 grains	Stock withdrawn from sale. New stock satisfactory Manufacturer cautioned.
D934	Saccharin Tablets	I		
D933	Saccharin Tablets	I		
D1054	Saccharin Tablets	F		
D839	Vinegar	P	Contained vinegar eels	Stock destroyed.

No.	Nature of Sample	Formal Informal Private	Nature of Offence	Observations
D891	Iced Lolly (Pre-packed)	I	Label offence – no statement of ingredients on label	Label amended.
D893	Ice Lolly (Pre-packed)	I	Sold in plain wrapper contrary to Labelling of Food Order	Label amended.
D971	Glace Cherries (Pre-packed)	I	No statement of ingredients on label	Stock withdrawn from sale for re-labelling.
D1026	Ice Lolly (Pre-packed)	I	Label offence – “Stabiliser” in list of ingredients – not a specific designation	Label amended.
D1032	Iced Lolly (Pre-packed)	I	Label offence – failed to disclose list of ingredients and address of packer	Label amended.
D1033	Iced Lolly (Pre-packed)	I	Label offence – sold in plain wrapper contrary to Labelling of Food Order	Label amended.
D1086	Ice Lolly (Pre-packed)	I	Label offence – failed to disclose list of ingredients and name and address of packer	Label amended.
D1125	Pork Sausages	I	Contained 60 p.p.m. undeclared SO ₂ preservative	Retailer cautioned.
D1188	Zinc Starch and Boracic Powder	I	Composition not in accordance with the formula for zinc starch and boric powder of the B.P.C.	Old stock. Withdrawn from sale.
D1195	Compound Syrup of Figs	I	Official designation used to describe a proprietary preparation	Label to be amended.
D1228	Friars Balsam	I	Abnormal composition implying not of the quality prescribed by the B.P.	Manufacturer advised.
D1381	Friars Balsam	I		
D1347	Ice Lolly (Pre-packed)	I	Label offence – supplied in plain wrapper contrary to Labelling of Food Order	Label amended.
D1385	Beef Sausages	I	Contained 100 p.p.m. undeclared SO ₂ preservative	Caution.

No.	Nature of Sample	Formal Informal Private	Nature of Offence	Observations
D1458	Mixed Peel (Pre-packed)	I	Contained liquid glucose not disclosed in list of ingredients	Packers' explanation accepted.
D1660	Beef Sausages	I	Contained 120 p.p.m. undeclared SO ₂ preservative	Caution.
D1578	Zinc Starch and Boracic Powder	I	Composition not in accordance with the formula for zinc starch and boric powder B.P.C.	Pack to be withdrawn and replaced by official preparation.
D1786	Butter Snips	I	Label offence—"Glucose" unqualified used to describe ingredient which was liquid glucose	Importer advised.
D1783	Glace Cherries (Pre-packed)	I	Label offence—"Glucose" unqualified used to describe liquid glucose	Packer has undertaken to amend label.
D1835	Eastons Syrup B.P. (1932)	I	Anhydrous ferrous phosphate 1.45% w/v. B.P. 1932 requires not less than 1.62% w/v.	Stock withdrawn from sale.

ADULTERATED AND UNSATISFACTORY SAMPLES

SUGAR CONFECTIONERY. A Code of Practice agreed between the trade and the Ministry of Food prescribes that where "butter" is used in the description of an article of sugar confectionery, at least 4% butter fat shall be present. A manufacturer who claimed to have been in the business for more than 50 years was found to be selling "Old English Butterscotch" which contained no butter whatever. He claimed to be unaware of the Code of Practice and undertook to suspend production and withdraw all stocks for re-labelling.

A sample of Peppermint Butterscotch was pre-packed with a label which made special claims, viz. : "Composed of Oil of Peppermint, Dairy Butter, Glucose and Sugar", and "The carminative properties of Oil of Peppermint in conjunction with Glucose (assimilable sugar) and the soluble fatty acids present in Dairy Butter provide greatly appreciated digestive assistance".

One could reasonably expect this article to be composed of nothing but oil of peppermint, pure dairy butter, pure glucose and sugar. Analysis showed, however, that the fat was a mixture of butter and margarine (the latter in greatest proportion), and the glucose was commercial liquid glucose (corn syrup) of which not more than one-third consisted of pure glucose. The manufacturer undertook to amend the label.

SAUSAGES. When an article is subject to price control it is obvious that a minimum quality must be enforced ; for this reason it was the duty of this Department to support the standards of the Ministry of Food of 50% beef and 65% pork when sausages were subject to the Maximum Price

Orders. Price control of sausages was withdrawn in 1953 and up to the time of writing the Ministry has resisted pressure from many sources and has declined to take any action to define what proportion of meat should be contained in a sausage. Under these circumstances it is inevitable that local courts will impose different standards, and a manufacturer who wishes to sell over a wide area is likely to find that his sausages are regarded as satisfactory in one area and yet find the same sausages to be the subject of a prosecution in the area of a neighbouring food and drugs authority.

If all manufacturers would provide a label giving a clear statement of the meat content of sausages, all concerned would receive a square deal.

Unfortunately, sausages are frequently made in small quantities by uneducated employees who cannot be relied upon to work to an accurate formula. In two cases during 1953, it was found that errors were due to using the wrong weights, guessing the proportions of rusk and water, and failing to provide adequate allowance for the container in which the meat was weighed. It was not surprising that a sausage claimed to be 75% meat actually contained 64%, due to errors of this kind.

Sausages now stay on the retailers shelves longer and there is an increasing tendency to add sulphur dioxide preservative. This is permissible within specified limits but the fact must be disclosed to the purchaser. Four retailers failed to declare the presence of preservative during the year.

VINEGAR. Two samples of cask vinegar contained vinegar eels. This tiny organism is not regarded as dangerous to health but it is aesthetically objectionable and no ordinary purchaser would accept vinegar so contaminated as being of the quality demanded. In each case the stock was destroyed.

LABEL OFFENCES

During 1953 further examples have been noted of the use of the unqualified word "glucose" for corn syrup or liquid glucose as an ingredient on food labels. In each case a considerable amount of correspondence has been required to establish that consumers regard glucose as a pure sugar and that it is illegal to apply the description to a mixture like corn syrup in the list of ingredients on a food label.

To the ordinary purchaser, the description "liquid glucose" does not suggest a syrup containing only 25% pure glucose, but it is the only description which the Labelling of Food Order permits apart from a statement in scientific terms such as dextrins, maltose, dextrose.

No less than 23 samples of pre-packed foods failed to comply with the requirements of the Labelling of Food Order, which requires a description of the contents, the name and address of the packer, and a list of the ingredients in the order or proportion by weight, using specific and not generic names. The various offences were as follows:—

Sold in plain wrapper	3 Ice Lollies.
No list of ingredients	7 Ice Lollies.
	1 Glace Cherries.
No name and address of packer	1 Yoghourt.
Generic description of contents	1 Nut Kernels.
Inaccurate statement of ingredi-	3 Ice Lollies.
ents or generic description of	2 Savoury Cheese Spread.
ingredient.	1 Dessert Powder.
	2 Sugar Confectionery.
	1 Mixed Peel.
	1 Glace Cherries.

All the packers undertook to comply with the requirements of the Order.

DRUGS

158 samples of drugs and medicinal preparations were examined in 1953 and 10 samples (6·3%) failed to satisfy the requirements of legislation.

ZINC, STARCH, BORACIC POWDER. Two samples failed to conform to the standards prescribed by the B.P.C. for zinc starch, boric powder. In each case there was a deficiency of boric acid and zinc oxide with corresponding excess of starch and talc. One manufacturer claimed the sample represented old stock and that his current production conformed to the official formula. The other manufacturer has undertaken to withdraw his stock for re-labelling and has since decided to produce only the official preparation.

COMPOUND SYRUP OF FIGS. Objection was taken to a label which used this designation in a manner which failed to indicate to the average non-technical consumer that the article was prepared according to a proprietary formula and was not the official preparation known as Compound Syrup of Figs, B.P.C. Members of the Pharmaceutical Society have now agreed on a Code of Conduct which disapproves of the use of official titles for preparations which do not conform to the official requirements for composition. The manufacturer of this sample undertook to re-design his label.

FRIARS BALSAM. The total solids of this preparation are normally of the order of 18% when it is prepared as directed by the B.P. Six samples satisfied this standard for total solids but one sample contained 13·7% of solid residue. This figure raises the presumption that the sample had not been prepared from ingredients of B.P. quality or, alternatively, had not been prepared by the process prescribed by the B.P.

The manufacturer was advised to check the quality of his raw materials and the method of manufacture.

EASTONS SYRUP. One retailer sold two samples which failed to satisfy the limits prescribed by the B.P.C. for iron, alkaloids or sugar. The samples were dispensed on the premises from three stock bottles and since the discrepancies found in the two samples differed considerably, it appeared that faulty dispensing was the only explanation. The analysis of another sample of this preparation (pre-packed) showed a deficiency of iron. The retailer's stock was returned to the manufacturer.

TINCTURE OF IODINE. Three samples failed to satisfy the stringent limits of the B.P. for iodine. Subsequent investigation indicated that at least part of the deficiency was due to chemical action between tincture of iodine and the rubber bung of the bottle and in one case the brush which was included in the bottle. With the co-operation of the pharmacist, a stock solution of tincture of iodine was transferred to three containers with different forms of stoppers and analysed after storage under typical retail conditions, after 12 months. The results were as follows :—

<i>Sample</i>				<i>Iodine w/v</i>	<i>Potassium Iodide w/v</i>
Original Stock Solution	..	..	..	2·45	2·45
AFTER 12 MONTHS STORAGE					
1 oz. bottle with glass stopper	..	..	..	2·40	2·44
1 oz. bottle with rubber bung	..	..	..	2·30	2·50
1 oz. bottle with rubber bung and brush	..	..	..	2·08	2·55
B.P. LIMITS OF VARIATION	..	..	..	2·45 to 2·55	2·45 to 2·55

It would appear that chemical action between the rubber bung, brush, and the iodine, is responsible for a loss of free iodine and a slight increase in combined iodine. This effect will vary according to the chemical composition of the rubber and the brush but it is clear that a satisfactory tincture of iodine may easily fail to satisfy the official limits after such contact during 12 months' storage. Plastic caps and ordinary corks have been found to be inadequate for retaining the iodine in this tincture and it seems that the stringent official limits demand a speedy turnover of stocks of pre-packed tincture of iodine.

Iodine is a highly reactive and volatile substance and in my opinion there is a case for wider limits of variation than those now prescribed (the B.P. 1953 permits only $\pm 2\%$ of the standard).

SWIMMING BATH WATER

During the summer season, samples of the water from the swimming and paddling pools at Southsea Castle, Hilsea, and Park Road were examined from a bacteriological and chemical aspect.

This testing has provided information which has materially assisted in the efficient control of the purification plant. Chlorine is used to maintain a high hygienic quality and filtration and added alkali are used to provide a water which is attractive in appearance and free from deleterious effect upon the eyes of bathers. No complaints concerning the water were received in 1953.

The hygienic quality of the swimming baths has been good but some contamination of paddling pools remains a problem in very hot weather. On occasions the contamination is added at a greater rate than can be dealt with by the purification process.

CITY WATER SUPPLY

Frequent chemical and bacteriological tests of the water supply have shown that the quality of the water is of the highest standards from both points of view. The chlorination has been carefully controlled and tests proved that at all times the proportion of chlorine was within the desirable range of 0.1 to 0.15 parts per million in the service pipes.

Further instances of copper contamination from copper pipes have been brought to the notice of the laboratory. Invariably, the suspicions of the householder are aroused by the appearance of a green deposit in the kettle; this is due to the fact that traces of copper are occluded in the temporary hardness salts which are precipitated when the water is boiled. In all cases the copper was appreciable in the first drawn water which had stood in the pipes overnight but the proportion in the water used subsequently during the day was insignificant. All the complaints of copper contamination have come from premises where new copper piping has been installed.

FERTILISERS AND FEEDING STUFFS ACT, 1926

This Act provides that, where specified descriptions are used, purchasers of fertilisers and feeding stuffs must be supplied with a quantitative statement of the valuable constituents which are a measure of the value of the article. The guarantees must be given in specific terms and must be reasonably accurate.

During the year 12 samples of fertilisers were examined under this Act ; in two instances the vendor failed to give the statutory statement of composition at the time of purchase.

Seven samples were wholly satisfactory, 5 showed slight deviations from the guarantees, and one sample of garden lime was quite unsatisfactory ; it consisted of ground chalk and it should have been so described.

ISLE OF WIGHT COUNTY COUNCIL

179 samples were examined in 1953 for the Isle of Wight County Council ; 174 under the Food and Drugs Act, and 5 under the Fertilisers and Feeding Stuffs Act.

Under the Food and Drugs Act, 24 samples were reported to be unsatisfactory (13·8%).

Three samples of hot milk contained added water. In one case proceedings for 37% added water resulted in a fine of £2 2s. 0d. and £1 1s. 0d. costs. An experiment showed that the tap of a churn used for hot milk was so placed that one-third of a pint of water remained in the churn after washing. Another experiment showed that heating milk with a steam jet for two minutes may add 3 to 4% of condensed water to the milk.

Further examples of the confusion over the description "glucose" were noted in 1953. Samples of marshmallow creme, butterscotch and bubbly gum claimed glucose as an ingredient whereas in each case liquid glucose (corn syrup) was actually used in the preparation. A sample of barley mints was labelled with such statements as "Contains the maximum proportion of glucose", "As supplied to hospitals, etc.", "Highly recommended by the medical profession". By implication these phrases imply that pure glucose had been added whereas the sample had been prepared from 2 parts sugar and 1 part corn syrup.

Glucose was given as the ingredient in a table jelly but the sample contained neither pure glucose nor corn syrup.

The label of a pre-packed sample of essence failed to give a list of ingredients and a sample of orangeade crystals claimed the presence of vitamin C but failed to give the amount present, contrary to the Labelling of Food Order.

A sample of sterilised cream carried a label which claimed "Thick cream". By implication the Foods Standards (Cream) Order suggests that thick cream is double cream with a much higher proportion of fat.

An article described as "Special Fruit Preserve" had the appearance of a jar of jam but it contained very much less sugar than is acceptable for jam. Although this fact was disclosed in technical terms by a statement giving the carbohydrate content it was nevertheless considered to be misleading to the average consumer. The manufacturer was informed that a clear statement that the article was sold as a low sugar diabetic jam, would be acceptable.

The labels of three samples of different forms of cereal foods gave statements indicating the carbohydrate and fat content. In each case analysis showed the statements to be inaccurate. One had a fat content which was twice the amount printed on the label and another claimed a trace of fat whereas 1·2 grams per oz. was present, a nutritionally significant amount. In the third case analysis disclosed an excess of carbohydrate over the amount stated – an excess of 24% of the figure printed on the label.

A cough cure was stated to be "An effective *cure* for coughs and colds".

It is contrary to good pharmaceutical conduct to apply the word 'cure' to any medicine. The term "Flavoured glucose syrup" was used to describe a mixture of sugar and liquid glucose in a sample of vitamin elixir. "Compound Epsom Salts Tablets" was regarded as a misleading description for a preparation which derived its therapeutic value from phenolphthalein rather than Epsom Salts.

BOROUGH OF GOSPORT

134 samples were submitted by the Borough of Gosport under the Food and Drugs Act. Ten samples were unsatisfactory (7·4%).

All the 57 samples of milk were free from added water and had a satisfactory fat content. Only one sample was inferior in solids other than fat due to the condition of the cows. Fourteen samples of Channel Island milk satisfied the standard for this type of milk.

One sample of pork sausage contained only 49% of meat instead of the 65% standard in force at that time. Another sample contained undeclared preservative.

A sponge flour mixture was contaminated with live mites and was inferior in raising power, evidently due to bad storage conditions.

The astringent and unpalatable taste of a sample of canned cherries was shewn to be due to excess salts of iron derived from the can.

Two samples of cheese spread were unsatisfactory – one was contaminated with a heavy mould growth and the other failed to declare the presence of emulsifying salts as an ingredient, contrary to the Labelling of Food Order.

Flour in excess of that permitted by the Food Standards Order was found in a sample of shredded suet. Steak and kidney pie was considered to be a false description for an article which contained no identifiable kidney.

A sample of boric ointment was prepared from an out-of-date formula ; it had an unsatisfactory appearance, having a rusty metal cap due to the presence of water in the hydrous ointment base. Water in excess of the limit of the B.P. was found in a sample of glycerin.

MISCELLANEOUS SAMPLES

The 506 samples of a miscellaneous character were submitted by various Corporation departments, private persons and industrial concerns. Fees were charged for 380 of these samples, and a sum of £350 has been received by the City Treasurer.

An additional sum of £498 15s. 0d. was received for the analysis of the samples submitted by Gosport Council and the Isle of Wight County Council under the Food and Drugs Act and the Fertilisers and Feeding Stuffs Act.

Private (Consulting)			Portsmouth Path- ological Laboratory			Petersfield R.D.C.		
Dripping	83		Urine	5		Sewage	4	
Sausage Meat	6							
Dried Blood	6							
Salt	2		Fareham U.D.C.			City Engineer		
Ice Cream	83		Meat Pie	1		Water	7	
Water	5		Water	3		Sea Water	1	
Cake Icing	1		Canned Prunes	1		Sewage	4	
Diesel Oil	2					Soil	48	
Ice Lolly	1							
Cream	5		Health Department			Cleansing Department		
Milk	3		Water	2		Pigs' Swill	3	
Whisky	1		Milk	34				
Jam	2		Milk Bottles	3				
Fertiliser	1		Sea Water	4		City Police		
Pigs Viscera	1		Meat Pie	1		Tablets	2	
Homogeniser Packing	5		Shredded Wheat	1		Carpet	1	
Bread	1		Dried Milk	1		Alleged Opium	1	
Lime	2		Oily Smears	2		Indian Hemp	1	
Brass Bolt	1					Water	1	
Soil	6					Tea Infusion	1	
			Aldershot U.D.C.					
Laboratory Information			Water	39				
Tincture of Iodine	3					Alton U.D.C.		
Water	4		Havant U.D.C.			Water	7	
Sausage Meat	1		Kettle	1				
Table Jelly	1		Water	8				
Vinegar	1		Soil	3		City Architect		
Butterscotch	1		Sewage	3		Bricks	2	
Stream Water	1					Soil	1	
Ice Cream Mix	1		Coroners' Specimens			Asphalt	1	
Gluten	1		Portsmouth	29				
Floor Stain	1		South Hants	5		Town Clerk		
			Isle of Wight	7		Paint Fragments	3	
City Airport								
Dried Grass	4		Chief Fire Officer			Education Department		
			Paint Remover	1		Sweeping Compounds	9	
Contracts & Supplies			Galvanised Wire	2		Degreasing Compounds	4	
Soap Powder	2		Varnish	1		Floor Oils	9	
			Oily Cloth	1				

